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Polite Fictions: AIDS and Rhetorics of Identity, Authority, and History

by

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The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research for acceptance, a thesis entitled *Polite Fictions: The Rhetorics of Identity, Authority, and History in AIDS Stories* in partial fulfillment of the requirements for the degree of Master of Arts.

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Dedication

To my father William, who taught me to disregard the polite fictions about the world, and to James, who has been my safety in the apocalypse.

Abstract

This thesis examines the impact of rhetoric on representations of gay men with AIDS. It considers AIDS rhetorics as enacted in three major areas of representation: identity, authority, and history. It examines Paul Monette's *Borrowed Time*, James Robert Baker's *Tim and Pete*, Christopher Coe's *Such Times*, and Peter McGehee's *Boys Like Us* and *Sweetheart* and focuses on these texts as offering a constructive literary response to the harmful rhetorics expressed in other discourses, including mass media representations and various mainstream literary works.

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The list of names worth acknowledging for their kind assistance must begin with my partner James A. Carr, whose endless encouragement and tremendous help have been as generous as his patience. I wish to thank Dr. Robert Solomon for his encouragement of my project in its infancy, and Dr. Chris Bullock for his patient and learned guidance in helping shape the final version of the thesis. I would also be remiss if I neglected to thank three friends for their myriad kind acts: Bill Bright, Christopher Brown, and Carl Kaminsky.

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Introduction

While AIDS may prove to be the most significant socio-historical phenomenon of the late 20th century, it is undoubtedly the galvanizing event in the entirety of gay history. With tens of thousands of gay men already dead from AIDS-related illnesses, and hundreds of thousands, and perhaps millions, of gay men infected with HIV, all other subjects pale in importance. As David Feinberg says most urgently in *Queer and Loathing*, "there really is no other topic" (69).

In addition to the horrific physical ravages caused by AIDS, numerous mainstream representations of AIDS, in various ways depersonalizing, disempowering, and destructive, have inflicted serious damage on the gay community in the time of AIDS. These prevailing, or mainstream, representations are generated by the medical establishment, the mass media, and by literature itself. A number of alternative texts, however, offer a wide spectrum of rhetorical strategies, with varying degrees of success, for the purpose of augmenting and challenging the prevailing representations of AIDS. The most promising of the AIDS writers subvert the more common representations to create a counterliterature based on healing and hope.

I will consider rhetorical strategies manifested in both the mainstream representations and the counterliterary responses. The rhetorical strategies I will examine include both the use of representations and discourses for a particular

purpose, such as the further stigmatization of an already-marginalized people, as well as the specific rhetorical elements--tone, setting, detail, genre, point of view. My focus is on some of the tools the AIDS storyteller uses to persuasively convey his purpose.

Many of the most common representations of AIDS, from the confusion about an "AIDS virus" to the characterization of AIDS as a "gay plague," suggest the power and reach of rhetoric. The shaping of AIDS representations goes far beyond artistic considerations by the storyteller, or even the common ground between the author and his readers. When I refer to "harmful" rhetorics, I mean those representations, strategies, and images which do harm to a gay man living with AIDS, whether by denying him equal consideration under the law, or access to the best possible medical treatment, or even the right to tell his own story. In *Policing Desire*, Simon Watney says AIDS reveals a gay identity "now particularly at risk, not from AIDS as such, but from the crisis of representation surrounding it" (18). AIDS rhetorics impress themselves upon the identity of a person with AIDS (PWA) as surely as the diseases ravage his body. Or, as June Callwood puts it, "people with AIDS. . . were fighting both the disease and public sentiment against them" (228). The lives of members of an already marginalized group of people can be further damaged by polite fictions about illness and sexuality.

This medical/metaphorical interaction reveals the "crisis of representation" in AIDS discourses. An article by the University of Washington's Discourse Analysis Group (WAUDAG), "Resisting the Public Discourse of AIDS," argues that

representations of AIDS reveal "a prime case of a disease being socially constructed" (393). Rhetorics can only "heal" to the degree that they overturn the crisis of representation which makes the person with AIDS less worthy of sympathy, compassion, and understanding. The AIDS counterliterature works to reclaim the identity of the person living with AIDS, to empower that person's voice, and to include him in the larger tapestry of his culture's history.

The counterliterature texts I have chosen for my discussion can all be categorized as stories of resistance to the prevailing representations of AIDS in our culture. They do more than simply offer resistance, however; they explore the intricacies of the social and emotional realities of AIDS, they examine the relationships between author, narrator, subject, and audience, and they offer an imaginative bridge to a more hopeful future where the diseases of AIDS are manageable and not as debilitating. Just as new drug therapies offer the hope of reducing the "viral load" in the body, so new rhetorics can reduce the psychical burdens brought on by AIDS.

My emphasis is not on elegaic descriptions of how AIDS "takes over" a life, nor what AIDS "means" to an infected individual or to society. I will instead consider how AIDS literature negotiates, consciously or not, the diverse rhetorics which have arisen in representations of the syndrome. Many of the mainstream AIDS texts have certain functional commonalities, such as the setting of the story roughly between seropositive revelation and the final death of the subject. In between these two events, we watch the subject and those around him come to

terms with what constitutes his identity, his relationship to the world around him and to history, and finally to a future somehow free of AIDS and all its associations. Each of the works I've selected is a cathartic release of the intense feelings surrounding being gay in the age of AIDS, and each is an attempt to bring the reader into the life of the narrator. My choice of primary texts is an attempt to bring to witness voices which time and illness have prematurely silenced.

The texts which have most profoundly shaped my perceptions on the experience of living with AIDS are Paul Monette's *Borrowed Time: An AIDS Memoir*, Christopher Coe's *Such Times*, James Robert Baker's *Tim and Pete*, and Peter McGehee's *Boys Like Us* and *Sweetheart.* Since I will be quoting from these works throughout my discussion, it may be helpful to provide a brief synopsis of some of the characters and situations in these texts. Monette's memoir records his lover Roger Horwitz' courageous last 19 months of life, from AIDS diagnosis to death. We see the intrusion of AIDS into Monette's comfortable, well-organized life, with Roger's and then his own diagnosis, and into the lives of his friends and loved ones, including screenwriter Bruce Weintraub and Paul's closest friend, Cesar Albani. While Paul's literary career falters, Roger fights to maintain his small law practice and the sense of purpose it brings to his life. In the novel *Such Times*, Coe documents the turbulent 18-year love affair between Jasper Eisendorfer and the narrator, Timothy Springer. Both characters were born into wealth and privilege, and travelled extensively before their lives were foreshortened by AIDS. In the shadow of their relationship are Jasper's partner

Oliver Ingraham and Timothy's friend Dominic. In both Monette's and Coe's texts, AIDS represents a very clear dividing line between lives before and after diagnosis. Monette calls Roger's diagnosis "the day we began to live on the moon" (2), all the more jarring given the privileges he (and Coe's narrator) has known. Both Monette's and Coe's narrators have seen a great deal of the world and feel increasingly enclosed by AIDS.

McGehee's and Baker's narratives are less focused on the foreignness of AIDS as on the inescapable fact of AIDS in each character's daily life. *Tim and Pete* is a picaresque journey across riot-torn Los Angeles, following the acquittal of the officers charged with beating motorist Rodney King, as the two title characters bicker, brood, and attempt to rediscover their long-lost love for each other. It is an angry, action-packed narrative, more road-trip than meditation. By the end of their journey, Tim and Pete will have encountered an assortment of homophobes, junkies, artists, and sexual temptations. McGehee's *Boys Like Us* introduces us to Zero MacNoo, caught between his past in straight-laced, small-town Arkansas and his new life in a large Canadian city. Zero examines the meaning of his relationships in terms of romantic, sexual, emotional, and spiritual needs. Family remains an important consideration as he questions his relationship with his biological family, his dying friend Randy, and his boyfriend Clay, as well as attempts to reestablish a bond with his ex-lover David. *Sweetheart* picks up one year later where *Boys Like Us* left off, with Zero's ongoing search for authenticity as he continues to live with AIDS. He finally finds, in Jeff Lake, the one romantic

and sexual partner he has long searched for. McGehee's focus is always on what constitutes family, be it blood or circumstance which defines that bond. In *Sweetheart*, Zero's "family" has expanded to include his ex, David, his long-lost cousin Trebreh, who is dying from AIDS, and the senile/oracular Stellrita back in Arkansas.

The commonality to these works is that AIDS, while central to the stories, never becomes the entire story of the main characters. AIDS is never the only "issue" of the text, but often merely an obstacle in the search for authenticity. Like institutionalized homophobia, AIDS exerts a force but not ultimately a control over the lives of these characters. All of these texts examine gay identity (in a national, social, and individual sense), the gay man's relationship to external sources of authority, and the gay man's place in history.

Tim and Pete and *Borrowed Time* stand at opposite ends of a spectrum of the differing rhetorical approaches to addressing the crisis of representation. *Tim and Pete* takes an angry, radical approach--the characters plot to kill homophobic U.S. politicians, to attack wealthy Republicans in La Jolla--in a work that is vivid in its harshness, jagged, direct phrases and dialogue. The rhetorical strategy of its literary construction--direct, "in your face"--parallels the radical plan of the characters and the radicalization of the narrator in the face of AIDS. Monette's narrator grows increasingly angrier and more frustrated as the text proceeds, but his characters strive to maintain the comfortable routine of their lives. McGehee's works are somewhere in the middle: he is neither a member of the elite, nor is he

radically alienated. Despite their vastly differing approaches, each has the ultimate aim of using their rhetoric towards some sort of positive end for gay men with HIV, which includes catharsis, bridging perspectives, sharing information, and offering testimony.

Black humor is evident throughout *Tim and Pete*, which is probably the best point of contact between that work and the works of McGehee. In McGehee's work, humor epitomizes the struggles of the characters in the face of homophobia and AIDS. The narrator is whistling in the dark, using humor as his main rhetorical strategy to undermine the anger and hatred around him. It is the very soul of camp. The conception of family, humorously and gently reworked as a source of support and comfort for gay men, and away from the politicized fundamentalist Christian co-opted term, also surfaces throughout. Paul Monette's works are, by contrast, often more languid and effete than McGehee's or Baker's. His background would be the same Republican, conservative LaJolla held in such contempt by the characters in *Tim and Pete*--if Monette weren't gay, with a lover dying of AIDS. As a consequence, *Borrowed Time*, while filled with the anger of its author, cannot be the radical attack on conventional politicians or conventional literary propriety, but instead is an introspective and intimate glimpse into the life of Monette's lover, a work full of metaphor and imagery, a wistful cry of mourning. Yet Monette is also excluded by the very power structures which should, after all, welcome him as one of their own: white, upper middle-class, educated.

For each of these texts, I will consider the rhetorical devices used to undercut and challenge the crisis of representation. Which strategies and tropes reoccur throughout the works? How are these texts, ultimately, projects of healing? AIDS rhetorics are a means of transmitting metaphor and symbolism in both the mass media and in literature. These rhetorics adapt themselves to a wide range of ideological agendas, from medical to political, from economic to moral. AIDS, like all significant socio-historical phenomena, is a vessel for ideologies. The language and imagery of AIDS has often centered around the notion of what Stephen Schecter calls "contamination wrought by pleasure" (62). Many literary texts, including some written by gay men, even gay men with AIDS, document the triumph of the moral over the biological. This stance, the subject spiritually awakened by progressive physical debilitation, was firmly established long before AIDS appeared. Susan Sontag, who wrote *Illness as Metaphor* after undergoing cancer treatment, discusses how unhealthy, even dehumanizing, this rhetorical strategy can be for the affected individual.

Other texts I will examine as representative of the more mainstream AIDS texts include Randy Shilts' *And The Band Played On*, Dominique Lapierre's *Beyond Love*, and June Callwood's *Jim: A Life with AIDS*. As a supplement to my arguments about the primary texts, I will also consider Susan Sontag's *Illness as Metaphor* and *AIDS and its Metaphors*, Stephen Schecter's *The AIDS Notebooks*, Simon Watney's *Policing Desire: Pornography, AIDS, and the Media*, David B. Feinberg's *Queer and Loathing: Rants and Raves of a Raging AIDS Clone*, and

Larry Kramer's *Reports From the Holocaust: The Story of an AIDS Activist.* I will examine critical articles by Emily Apter, Peter Bowen, James Jones, James Miller and others from the *Writing AIDS* collection, edited by Timothy F. Murphy and Suzanne Poirier. I will also consider the harmful and healing rhetorics in the following short works of fiction: McGehee's "Sex and Love," Andrew Holleran's "Ties," Adam Mars-Jones' "Slim," and David Vernon's "Inside." Finally, I will consider Albert Camus' *The Plague* (*La Peste*) because its language and imagery continue to influence chroniclers of the epidemic in our time. Camus' work was, arguably, the 20th century's most important epidemiographical treatise prior to the appearance of AIDS. "Epidemiography" is a term meant to describe the process of the writing of AIDS stories and all the socio-historical forces exerted by and upon this process.

Many AIDS writers, with the exception of Monette, Shilts, and Sontag, have not been subjected to a great deal of critical response. The works of Baker, Coe, and McGehee, for instance, have received negligible critical commentary. I hold up these three writers, along with Monette, as examples of writers whose texts offer healing--testimony, empathy, hope--in the face of AIDS. My choices do not reflect any attempt to track down the elusive "representational" AIDS text. The AIDS literary canon is comprised mainly of the writings of upper-to-middle class white males living in North America. I have chosen to uphold this "canon" because locating AIDS stories by black, Hispanic, or Asian writers is a difficult task. It doesn't mean these stories aren't getting told, just that their authors face

additional obstacles both with the diseases and the accompanying rhetorics. As Monette observed: "You don't need cautionary tales like the Titanic to know how many survive in steerage and how many on the boat deck" (38).

People living with AIDS don't have time to debate which discourses are complicit with institutionalized homophobia and which challenge it. It is left for those with the luxuries of time and energy to take on the task on behalf of their more greatly burdened brethren. I will examine selected AIDS literature in terms of three important purposes for AIDS texts: to question how and where authority is imbedded in each text, to explore how a gay man's identity is represented in the texts, and to consider how history is written as AIDS stories are told.

AIDS Rhetorics and Identity

For many a gay man, AIDS has become as important a truth of his identity, a means of knowing himself, as any significant epiphany between ancient Greek mythology and post-Stonewall reality. Which personal or social epiphanies will ultimately be added to a gay man's identity is often a question of the efficacy of the rhetorics and the potency of the imagery used. In this chapter, I will demonstrate the crisis of representation as it acts specifically on the area of identity. I will examine healing rhetorical strategies which focus on the textual "reclamation" of the "lost" subject or individual, especially that individual's memories. These strategies, if they are successful, help reclaim an individual's forgotten or renounced past. These strategies work, ultimately, to extend the temporal and social dimensions of the individual living with AIDS.

My focus in this chapter is predominantly on Peter McGehee's *Boys Like Us* and *Sweetheart* and Christopher Coe's *Such Times* because these works in particular repersonalize their subjects by foregrounding memories of epicurean, romantic, and sexual pleasures. Both McGehee and Coe closely examine the relationship between the individual and his community. Their texts offer responses to the emptiness and oblivion expressed in more mainstream representations: the hapless "AIDS victim," dying "alone and forgotten," having "lost a hopeless battle" against "the killer AIDS virus." Such representations are

commonplace in many newspaper and magazine articles, as well as the more popular literature, to this very day. All of the familiar images created by these representations, which have become some of the clichés of AIDS narratives, are the products of prevailing rhetorical strategies which the AIDS counterliterature is forced to respond to if the identity of the gay man with AIDS is to be reclaimed, his "space" reestablished, his memory cherished.

As a critical context, I will consider Susan Sontag's discussion, in *Illness as Metaphor* and *AIDS and Its Metaphors*, of the ways in which the identity of the individual, who "holds dual citizenship, in the kingdom of the well and in the kingdom of the sick" (3), is [de]constructed by metaphorical representations, including those of disease, illness, and death, and by other rhetorical strategies. Sontag examines identity using a model of nationality and draws many of her conclusions from this model. I will discuss nationality in greater detail in the next chapter, but I briefly consider it here as one component of individual identity. More important is the notion of "community" as a spatial and social dimension of identity. Simon Watney's examination of communities as inclusive and exclusive, in *Policing Desire: Pornography, AIDS and the Media*, is relevant to my consideration of identity. Watney says AIDS reveals a gay identity "now particularly at risk, not from AIDS as such, but from the crisis of representation surrounding it" (18). In "The Plague and Its Texts: AIDS and Recent American Fiction," James Jones says the division between the infected "us" and the uninfected "them" "arises out of fear of infection, but it is 'their' fear of 'us' which

strengthens the very bonds of the gay community" (75).

I must first consider what, for the purpose of my argument, constitutes "identity." A fundamental principle of "identity," which applies to science and mathematics, is of an equation which holds true under all conditions. Ascertaining a subject's identity means determining what is consistent and verifiable, even "true" about that individual. In literary texts and the representations these engender, identity is inherently more subjective. The broadest definition of identity, for my purposes, begins with the synthesis of such "influences" as nationality, community, religion, psychological makeup, and the physical body in the formation of the "self" or "subject." Individual identity is created and influenced by forces both external (geography, social context, mass media representations) and internal (morality, desire, experience, memory).

Identity has always been relatively troublesome for gay men, who are initially "programmed" by their parents, siblings, church, teachers, friends, from "texts" in their libraries and across their television screens. When they "come out" and declare themselves "gay," they are further molded by their friends, lovers, tricks and, often much later, by whatever they perceive to be the gay community. Even the medical establishment contributes to this meticulous construction of identity, when it describes gay men as "promiscuous" and a "high-risk" group for HIV infection. Identity, then, is often expressed in layers of adjectives: "gay," "American/Canadian," "sick," "deviant." AIDS adds one more burdensome component to an identity which is a negotiation between nationality, gay

community, ethnicity, and other factors. My main focus is on identity as manifested in particular images in a literary text. Literature, after all, offers its own means of manufacturing subjectivity.

In *AIDS and Its Metaphors*, Sontag considers how AIDS

> flushes out an identity that might have remained hidden from neighbors, jobmates, family, friends. . . It also confirms an identity and, among the risk group in the United States most severely affected in the beginning, homosexual men, has been a creator of community as well as an experience that isolates the ill and exposes them to harassment and persecution. (113)

As AIDS reveals this new concept of identity, Sontag says, so too does it offer its own (new) version of community. Watney describes two perspectives on gay identity, in relation to "community," as revealed by the AIDS crisis:

> On the one hand, we are invited to think of ourselves as a coherent, unified group, roughly analogous to race. . . On the other hand we actually experience our social being as a series of discontinuous exclusions through which we move at work, in our families, and elsewhere. (24-25)

There is always a precarious balance between individual and social identities, and between external and internal definitions. McGehee's narrator speaks of submersion in a gay communal identity: "There's nothing like being in a crowd with thousands of queers" (*Boys* 115). However, a crowd gathered for a common

purpose, whether at a candlelight vigil, at a gay bar, a demonstration, or within a literary text, is not necessarily a "community" in any meaningful sense of the word. And even after the gay man finds a meaningful niche in the community around him, he must constantly prioritize his own values in the quest for his own "true" self.

Sontag and Watney offer a broad definition of the term "identity" which includes some of the aspects of the term useful to my discussion. Identity is, to expand Watney's argument, a negotiation between communities of inclusion and exclusion, the redefinition of the subject's social, spatial, and temporal dimensions. Identity is an ideological construct shaped by the culture in which the individual lives. Ultimately, the person living with AIDS must resist the imposition of his identity as infectious other, a community of exile, and based on exclusion, and find alternative presentations of identity. These new presentations must incorporate the multiple and varied sites upon which identity is inscribed. My focus is on identity as an ideological construct or perspective bound by particular social, spatial, and temporal constraints. I will examine identity as expressed in particular images and themes as an individual attempts to locate himself within his narrative.

Abstracting the Self

The crisis of representation asserts itself in the arena of identity in the

following ways: the depersonalization of the subject, with someone else telling his story; temporal condensation, which makes the struggle with AIDS the entire story of an individual; and a focus on the progressive social and spatial isolation of the person living with AIDS. The rhetorical devices used are perspective, detail, and patterns of imagery. All of these are used in mainstream representations to further remove the subject from the reach of the readers' sympathies. Emily Apter, in "Fantom Images: Hervé Guibert and the Writing of 'sida' in France," says that AIDS serves as a "fantasmic contagion. . . capable of blurring the boundaries, both mental and physical, of individual personhood" (88). Prevailing representations of AIDS ensure that the subject is removed from any sort of community in which he might meaningfully partake and is estranged from his own "self." This abstraction of the self is accomplished by the use of perspective, the muting of detail, the limiting of the range of settings and, most importantly, by specific patterns of imagery.

In terms of the depersonalization of the subject, texts which embody the crisis of representation prevent the subject from telling his own story. This narratorial appropriation leads to a consideration of perspective. The narratorial perspectives used by Shilts, Lapierre, and Callwood serve, like mass media perspectives, to distance the narrator from the narrative action. I've chosen these texts, along with a few selections from the mass media, as representating the crisis of representation literature. These texts have all been designed to address a heterosexual readership and to document the AIDS crisis on behalf of those worst affected. Shilts' book, in

particular, has been extremely influential in shaping public opinion about AIDS. Lapierre, while ignored by devotees of "serious" literature, has enjoyed immense popularity worldwide.

I will also include June Callwood in my examination of the crisis literature because Callwood, like Sontag, is an established author inserting herself into the literary debate on AIDS. Callwood entitled her book *Jim: A Life With AIDS*, although AIDS was a small fraction of her subject's chronological life. In the introduction to her biography of Jim, Callwood admits:

> I did not want to write this book. I thought when I first met Jim St. James that he would die in a few months, and I didn't want to watch that happen. Certainly, in the inevitable intimacy that is formed between writer and subject, I would come to care for him, and the pain of his death would be hard to bear. (1)

She begins Jim's story in November 1983, when Jim first began to experience symptoms of his HIV infection, in his 29th year. Her text opens with "It began" (5) and the reader immediately understands the "It" as AIDS. Callwood will furnish other biographical details as the narrative unfolds, having established AIDS as the true subject of the text, and her distance from that subject.

In *And The Band Played On*, Randy Shilts subordinates all of his characters' individual stories, their memories and their very identities, to the greater story of the spread of AIDS. The clearest example is in his presentation of "Patient Zero," the Quebecois airline steward Gaetan Dugas. Dugas, by many accounts dashing,

gregarious, and very sexually-active, was among the earliest individuals in North America to be diagnosed with AIDS. In fact, Shilts calls him "the first person in his country [Canada] to be diagnosed with AIDS" (84). Shilts irresponsibly calls Dugas "the Quebecois version of Typhoid Mary," (158) as if Gaetan and Mary weren't also affected by both disease and misrepresentation. Shilts says:

> Later, when the researchers started referring to Gaetan Dugas simply as Patient Zero, they would retrace the airline steward's travels. . . to try to fathom the bizarre coincidences and the unique role the handsome young steward performed in the coming epidemic. (23)

More important than Dugas' "role" in the spread of AIDS is his role in Shilts' narrative. Shilts reduces Dugas' "story" to a mere statistical point on his map of AIDS morbidity.[1]

Depersonalization of the subject can be accomplished by the withholding of details. Marilyn Chandler, in "No Immunity: AIDS in Recent Fiction," says AIDS literature can "correct some of the depersonalization inherent in more 'objective' media coverage" (148), which often works to obliterate particularities. Mass media attempts to relate AIDS are often loaded with what look like personal details but only serve as a series of coded symbols for the intended audience, so the subject ends up as little more than a statistic. A 1987 *Macleans* article, "AIDS and Sex," quotes Toronto doctor Stanley Read: "'People worry about eating in restaurants with a gay chef and ask what would happen if he cuts his hand and the

blood drips into the salad" (33). The article addresses the widespread fears about AIDS, "reflected in the desperate actions of the government, the hesitant statements of politicians and the pleas for reassurance from ordinary people" (30). Gay men are apparently not "ordinary" enough for this cover story, which interviews only a single one, Winnipeg politician Glen Murray, whom it neglects to identify as gay.

Since the rhetorical strategy of omission can be made to seem unconscious, it is often elusive and hard to track. Roger Myrick says the mass media communicate misinformation about AIDS in two important ways. The first is the focus on the potential for epidemic in the "general public," a denial of "the hundreds of thousands of gays who have died and are dying from the syndrome" (45). The second deliberate miscommunication, and one Shilts, Lapierre, and Callwood are each complicit in, is the equation of AIDS "with large numbers of sexual encounters, rather than the quality of sexual encounters" (45). These miscommunications prevent the accurate conveying of facts about AIDS and the ways to prevent HIV infection during sex.

Some gay men, attempting to represent their perspective, still end up being pawns of their editors, their co-authors, or even photographers who help tell their stories to the heterosexual majority. In "Dante on Fire Island: Reinventing Heaven in the AIDS Elegy," James Miller notes that, to preserve

> the insidious decorum of the Invisible Minority, the casket must be politely, politically closed. No matter how outrageously "out" you

> are in life, in death, it seems, you must be closeted up again to preserve the illusion of gay resignation to the dominance of decent society. (286)

A 1993 *Newsweek* article "A Lost Generation," which addresses the loss to AIDS of a great proportion of North America's arts community, discusses Nureyev's concealment of his AIDS. The article quotes a personal friend, Wallace Potts, in explaining Nureyev's decision to not disclose his condition: "'your whole life becomes dealing with the disease. . . He didn't want it to consume his art'" (19). The article quotes Monette's reaction to Nureyev's secrecy: "'I don't consider him a great hero of the art. I consider him a coward, I don't care how great a dancer he was'" (19).

Setting is another important means by which the abstraction of the individual can be accomodated in a text. Many of the mass media representations of the person with AIDS, including those provided by Hollywood, focus on the gay man with AIDS in the role of patient, in specific, familiar spaces, such as on a hospital bed or in a coffin. The crisis of representation offers a narrow range of settings appropriate to an AIDS story, few of which are conducive to the emergence of individual identity. In Camus' *The Plague*, the denizens of Oran progressively lose control over their identities as the unnamed plague spreads. As in Sontag's allegorical kingdom of the unwell, where wellness means wholeness, so in Oran individuality is erased: "Unfortunately from now on you'll belong here, like everyone else" (73). In this instance, sickness places the individual in a

community of exiles: "Hostile to the past, impatient of the present, and cheated of the future, we were much like those whom men's justice, or hatred, forces to live behind prison bars (62). In this instance, community and setting become inseparable, as sites of containment. I will focus on setting in greater detail in the subsequent chapters, but most relevant to identity is the notion of the body as a setting for particular representations.

Offering an alternate spatial setting, many AIDS narratives focus on the body (as it stands in for the text) as the setting for the HIV diseases (the "message" of the text). In "AIDS, Stigma, and Narratives of Containment," Julia Epstein argues that "HIV infection and AIDS have catalyzed a discourse about the human body as a bounded material entity, a container that must itself be contained" (294). AIDS rhetorics in mainstream representations, and counterliterature responses, often highlight the withering body of the subject. These rhetorics do tremendous harm when they threaten to transform the individual body (the setting) into something unrecognizable, even insidious. In "Streets of Philadelphia," Bruce Springsteen sings, "I was unrecognizable to myself / I saw my reflection in a window I didn't know my own face." Coe's Timothy notes: "The appearance of the people with the virus, how they look physically, is more widely documented than what they feel under their skin, inside themselves" (204).

In addition to detached perspective, the obliteration of detail, and the restriction of setting, specific rhetorical strategies foregrounding patterns of imagery are relevant to a consideration of identity. In much of the mainstream AIDS literature,

the crisis of representation literature, the reader is presented with images of monstrosity (often AIDS as leprosy), of the person with AIDS as a victim, the metonymic equation of the gay man as a vessel for (or mere vector of) infection and, most commonly, images of plague. These images all come from "outside," representing a community based on exclusion. Often even the counterliterature uses these patterns of imagery uncritically, but the images are plentiful in more mainstream representations.

Lapierre's *Beyond Love* links the search for HIV with the treatment of leprosy among the poorest in India's slums. Lapierre parallels Mother Teresa's mission to "Touch a leper with your compassion" (33) with the call for greater compassion towards people with AIDS. Ananda, a young Indian girl born into the caste of untouchables, feels cursed by her birthright:

> "The curse of my karma was too strong. . . It had permeated every fiber of my skin with a blackness that was darker even than my color. The gods had made me a pariah. I must remain subject to their will. I had been born guilty. I had no right to be loved." (56)

Ananda's lament could just as easily be expressed by the self-hating gay man living with AIDS, who might view being gay and having AIDS as a double "curse." Lapierre calls AIDS "four letters that would soon resound like the curse of this millenium's end" (138). Leprosy is one example of AIDS as a metaphor for something which transforms the body into something different, frightening, even monstrous. As James Jones notes in "The Plague and Its Texts," representations of

illness and of "the plague transforms the body into something alienating" (76). In Callwood's *Jim*, Jim visits a former workmate named Irv, dying in hospital: "Jim looked at the living cadaver and whispered to a nurse, 'How can he be alive? He can't possibly be alive'" (221). Shilts describes the approaching death of Simon Guzman:

> With his once-handsome face completely disfigured by the Kaposi's lesions and his body swollen by medications, Simon had taken on the appearance of the bloated and scarred Elephant Man. (127)

Shilts furnishes another example in the deterioration of Nick, who is described simply as Enno Poersch's lover:

> Most frightening to Enno were the bizarre changes in Nick's body. His frame seemed to be curling in upon itself. Nick became pigeon-toed while his trunk hunched over, his shoulders turning toward each other as if he were returning to some macabre and wasted fetal position. (33)

Portraying the person with AIDS as monstrous and frightening removes him from the readers' identification and sympathy.

Another image is that of the helpless AIDS victim. The term "victim," the characterization of the person with AIDS as powerless, dependant, and vulnerable, is prevalent even in the most effective examples of the counterliterature, but this term is also used uncritically throughout the texts of Shilts, Callwood, and

Lapierre. Beginning with his prologue to *And The Band Played On*, Shilts singles out "doctors and nurses who went far beyond the call of duty to care for its victims" as well as the

> many victims of the epidemic who fought rejection, fear, isolation, and their own deadly prognoses to make people understand and to make people care. (xxiii)

Callwood mentions the spread of HIV through sexual contact, sharing of needles, and across "Another identifiable group of victims," (140) hemophiliacs. Describing three hemophiliacs infected with HIV, Lapierre says, "Medical history would not preserve the names of those three victims" (137). In *Tim and Pete*, Pete uses the word "victim" to rail against the passivity of gay men with AIDS: "'They're still into playing victim and martyr, which is what people want to see. Be a good little faggot and mince off to the hospice and pay for your sins'" (143). Kramer explains: "People hate victims, because they see in them something they're terrified of becoming: themselves as victims" (245). The word "victim" connotes a certain destiny of pain and misery, almost an inevitability. Both "destiny" and "inevitability" suggest, if only subconsciously, that the individual somehow deserves the fate which has befallen him.

Another image common to many mainstream representations is the gay man with AIDS as a vector for HIV infection. Shilts certainly accomplishes this with his characterization of "Patient Zero." Feinberg notes: "At times I feel my body has been transformed into a factory of infection, a vessel of virus" (96). Instead of

an individual who has been infected with a virus, Feinberg says he has become "merely the host" (96) of HIV. As a thinly-veiled attempt to make the gay man with AIDS the author of his own demise, some AIDS stories situate the "origin" of an HIV infection, or even of AIDS itself, in the gay man's penis. Coe's Dominic tells Timothy about a man who died two days after diagnosis: "he was supposed to have the Dick of Death" (165).[2] In reality, even though HIV can be sexually transmitted (as can the common cold), the penis is not the pen which transcribes the AIDS epidemic. The physical body is, instead, the space upon which the medical crises of AIDS are written, just as the representational crises are written on the identity of the gay man living with AIDS. Lee Edelman, in "The Mirror and the Tank," says "the gay male anus as the site of pleasure gives birth to 'AIDS' as a figuration of death" (16). This intimately connects the rhetorical strategies of setting and imagery.

Sontag noted that "plague," one of the most persistent AIDS images, "is the principal metaphor by which the AIDS epidemic is understood" (132). In George Whitmore's *Someone Was Here*, Dino defines a community based on exclusion when he reveals: "people on the street fall back. . . 'like I'm a walking plague'" (165). The plague metaphor often becomes internalized to the extent that even the gay man with AIDS perceives himself as a "plague-carrier." Lapierre quotes epidemiologist Dr. Jim Curran: "'With a little bit of luck, I shall live long enough to tell my children about our victory over the plague'" (388). The reader cannot help but note the signalling of Curran's heterosexuality ("my children") and the

subtly-drawn distinction between "our" victory over the infected "them." This is a "plague" from which Curran smugly insulates himself. Shilts indulges in some speculation regarding Gaetan Dugas' willful contribution to the spread of AIDS:

> It was around this time that rumors began on Castro Street about a strange guy at the Eighth and Howard bathhouse, a blond with a French accent. He would have sex with you, turn up the lights in the cubicle, and point out his Kaposi's sarcoma lesions.
>
> "I've got gay cancer," he'd say. "I'm going to die and so are you." (165)

Shilts never met Gaetan Dugas but, as Dugas' contemporary and a journalist in San Francisco, he likely heard these "rumors" firsthand. This raises doubts about his journalistic reliability. Fellow journalist June Callwood says: "Dugas certainly contributed to the spread of AIDS, but it is doubtful that he was Patient Zero" (151). The whole notion of "plague" is entangled with moralistic and pseudo-theological considerations which attempt to, and too often do, exert force on political, legal, psychological, medical, and even linguistic realms. A nameless night-porter in Camus' *The Plague* laments the moralization of a medical reality:

> "Ah, if only it had been an earthquake! A good bad shock, and there you are! You count the dead and living, and that's an end of it. But this here blasted disease--even them as haven't got it can't think of anything else." (97)

"Plague" is from the Latin for "blow, stroke, or wound," such as might be inflicted

as divine retribution. The already-deviant or marginalized are most often cast as the infected "plague- stricken." As James Jones, in "The Plague and Its Texts," notes:

> These [infected] Others lose their humanity through their election to step beyond the norm despite knowledge of those limits and the possible punishments. (73)

In this reduction of the individual to a mere means of communicating infection, it is easier to rationalize talk of mandatory HIV testing, the quarantine of PWAs, and other measures which don't address an individual human life so much as they do the containment of a virus.

These patterns of imagery, the use of perspective, the inclusion and omission of significant details, the settings the narrator chooses--in short, all of these rhetorical devices lead to the abstraction of the subject, which depersonalizes, dehumanizes, and discounts that individual's intrinsic worth. The final effect of this abstraction is that AIDS becomes the only part of the individual worth relating and remembering. Thus AIDS gets remembered but the individual, in any meaningful sense, is forgotten.

Reclaiming the Self

Having examined the literature which represents identity imperilled by representations of AIDS, I will next focus my attention on what constitutes an AIDS counterliterature in the arena of identity. The themes and rhetorical

strategies which attempt healing must, in the first place, establish the subject's narrative identity. The AIDS counterliterature must fill in the details deliberately withheld by the crisis of representation literature. In *Such Times*, Timothy ponders the implications of hiding his HIV status and decides against it because "You cease to be yourself, you become your secret" (202). Timothy strives to be more than a text withheld. Depersonalization means defining the subject merely by his function in the narrative, which Timothy (and Coe) refuses to let happen.

The counterliterature strategies must work to repersonalize the subject, reestablish his temporal and social (and physical) spaces, and present AIDS as one small point on the course of his life. Coe and McGehee foreground memory as essential in preserving the identity of the departed. As Jasper and Timothy discuss a friend who has recently committed suicide, Jasper says: "'Think of all the education. . . All the books read, all the dinners eaten, and think of all the fucking enjoyed'" (142). When Jasper concludes it has all been for nothing, Timothy responds, "'Maybe not for nothing. . . We're talking about him. In a way, that keeps him alive'" (142). Whatever else the AIDS counterliterature may accomplish, it must repersonalize the subject.

Imagery is the most important means by which the identity of the gay man living with AIDS can be meaningfully reclaimed in a literary text. Sometimes the strategy of this imagery is expressed in rhetorical devices which emphasize the dismissal of any sort of imagery as woefully inadequate to convey any great truths about AIDS. Cancer-survivor Sontag claims she wrote *Illness as Metaphor* "not to

confer meaning, which is the traditional literary endeavor, but to deprive something of meaning" (102). She reminds her reader:

> As long as a particular disease is treated as an evil, invincible predator, not just a disease, most people. . . will indeed be demoralized by learning what disease they have. (7)

In his article "Late Victorians," Richard Rodriguez concurs with Sontag that AIDS must be somehow freed of its present metaphorical associations and recognized as "a non-metaphorical disease, a disease like any other" (64). Rodriguez conveys the limitations of imagery by beginning with a series of vibrant images:

> AIDS. . . is a plague of absence. Absence opened in the blood. Absence condensed into the fluid of passing emotion. Absence shot through opalescent tugs of semen to deflower the city. (64)

This vibrant, but ultimately meaningless, imagery is meant to echo some of the images in mainstream representations which are constructed to give meaning to the HIV diseases. Rodriguez's anti-metaphorical stance becomes clearer as he proceeds:

> And then AIDS, it was discovered, is a non-metaphorical disease, a disease like any other. Absence sprang from substance--a virus, a hairy bubble upon a needle, a platter of no intention served round: fever, blisters, a death sentence. (64-65)

The self cannot be meaningfully reclaimed as long as metaphorical representations from elsewhere constantly stake their own claims on the subject's identity.

The refusal of imagery is an attempt to dismantle AIDS representations which deny the individual his personhood. In "Refusing the Name," James Jones talks about AIDS stories in terms of their resistance to prevailing stereotypes about the HIV diseases:

> To refuse to name is to resist a power that seeks to strengthen and protect itself by classifying and excluding. That refusal has become a dynamic theme within the literary response to AIDS. It empowers both sick and healthy to move beyond the language of AIDS and to speak to one another with the words of their shared humanity. (240-241)

In "Immersive and Counterimmersive Writing About AIDS," Joseph Cady takes up a similar argument but finally concludes that "counterimmersive" writing, what James Jones calls "refusing the name," has profound limitations:

> By doing nothing to dislodge its characters' and audience's skirting of AIDS, a counter-immersive work runs the risk of ultimately collaborating with the larger cultural denial of the disease. (261)

While the counterliterature writer can engage in a willful refusal of imagery or metaphorization, he can also present alternative sets of imagery.

A strategy opposite to the refusal of imagery is the presentation of sensuous imagery (including sexual and epicurean) to counter the prevailing cold, sterile, and isolating imagery found in mainstream representations. In terms of sensuous imagery, readers of the AIDS counterliterature are given detailed descriptions of

particular settings and surrounding images, menus of sumptuous feasts, and intimate details of candlelit evenings with handsome companions. Monette describes an afternoon he and Roger spent at the Santa Monica Mountains National Park:

> There we both had a rush of the throat-tightening sweetness of things, the perfection of time in which nothing at all was happening except that we were together. Wouldn't it be grand, said Rog, if it could all just stay like this? (151)

The "perfection" both men share in this transcendent moment is triggered by little more than the sound of "dry leaves of a sycamore clattering in the breeze" (151).

In terms of images of locale, imagery serves to extend the spatial and social boundries of the person with AIDS. Coe's characters have had the opportunity to "travel the civilized world" (8). Timothy recalls Dominic's postcards: "Palm Springs, Honolulu, letters scribbled in cafes or on beaches between bouts of sightseeing or of lust" (6). Timothy recalls his travels through Italy and France: "We walked along the Champs-Elysees, through Les Jardins de Marcel Proust, and stopped in the Tuileries" (207). Like Coe's *Such Times*, McGehee's novels frequently seem to function as the narrator's travel journals. Zero MacNoo, returning to the family house in Arkansas, tells his mother:

> "I'm just as much a product of this place as you are. I'll thank you to let me decide for myself which parts belong and which don't." (*Boys* 80)

Travel and locale imagery introduces the issue of nationalism in the AIDS counterliterature. Individual identity is at least partially determined by the subject's national context. For gay men and lesbians, nationality is often secondary to cultural, sexual, and community boundaries. Peter McGehee, for instance, was born and raised in the USA, but spent much of his "later life" (he died at the age of 35) as a Canadian. Like their author, his characters hop back and forth across the 49th parallel. There may be few truly profound differences between Canadian and American "culture," but a critical one in time of AIDS is universal healthcare. Many gay men who started life as Canadian citizens simply cannot afford to die in their adopted homeland of the USA.

In *Boys Like Us*, Randy encourages Zero to return to Arkansas for a visit: "There's nothing like spending a little time in the place you come from to get some perspective on where you are now" (47). When Zero tells David that his family in Arkansas poses many more questions than answers, David replies, "'Sometimes questions can be answers unto themselves.'" Zero's response is: "'Not in Arkansas.'" (129) When he returns to Arkansas in *Sweetheart*, Zero stares from the airplane window at the Arkansas River:

> It slithers through the landscape of bluffs and pine trees like some kind of prehistoric serpent. I love to stare at it. It hypnotizes me. It gives me a sense of my whole life being one blazing moment. (78)

As Randy's surviving lover Alan writes on his change-of-address card to Zero, "'New address, new life'" (200). In McGehee's narratives, as well as Coe's, it is not

geography which matters as much as the intellectual and emotional distance the characters have travelled through life.

In addition to images of locale, the counterliterature also presents culinary and epicurean imagery, particularly in Coe's fictional *Such Times*. Coe's narrator gives long, detailed lists of particular ingredients which made so many of Timothy's dinners so memorable:

> I think of a lunch Jasper and I had in Imola, of the fried zucchini blossoms at Piperno in Rome, of the sea urchin souffles, served in their shells, at Le Pre Catalan. (23)

Timothy recalls another time when

> Jasper made glorious dinners for us: lacquered ducks with raspberries, baby pheasants stuffed with chestnuts and radicchio, which Jasper would steam briefly to take off the bitter edge, gigot en croute, whole striped bass stuffed with oysters and figs, spaghetti with shaved white truffles. (33)

Important events often transpire, for Coe's characters, around the dinner table. The day Jasper reveals his unwillingness to leave Oliver and live with Timothy, Timothy recalls: "That night I had made an exceptionally fine *sauce remoulade* for oysters that I had fried in beer batter with paprika" (243). Sharing dinner, Timothy explains, has far greater significance than simply sating hunger or enacting a routine:

> Jasper was making a dinner, and the simple act of our eating it

> together, an occasion, an event, and that it is by gestures like this that daily life is made less daily. This by itself, making daily life less daily, strikes me as being an enterprise worth saluting. (33-34)

Timothy prepares a lunch for Jasper at their final meeting:

> I brought him a small loin of pork, cooked the night before with mustard, with brown sugar, a fair amount of bourbon, and a few pitted prunes. . . I brought Jasper some peeled yellow peppers in a light sheen of hazelnut oil, with a dribble of balsamica. I brought him a simple tart of one perfect fig, sliced on a layer of *creme patisserie*, on very light pastry that I had made two days before with finely ground hazelnuts, no flour, which I had chilled for forty-eight hours and rolled out every four, before rolling it out the final time and baking it that morning. (312)

Despite the trouble Timothy takes to prepare this lunch, Jasper is unable to take in solid food, thus breaking the connection he and Timothy had in the mutual enjoyment of their dinners.

It is fortunate for Timothy, the survivor, that he is still able to make this epicurean connection outside of his relationship with Jasper. Timothy describes the dinner he and Dominic share at an Italian restaurant in Los Angeles:

> The *risotto* has a saffron color. It is strewn with the glossy dark-green shells and bright orange flesh of giant mussels from New Zealand and the grayish pinks of giant prawns from Santa Barbara.

> They are butterflied but otherwise left whole. (39)

When Dominic tastes it, he says "'This *risotto* will change your life'" (39). Hidden within Dominic's lavish hyperbole is the truth, for Coe, that a good dinner transcends time and place. Unable to share one last lunch with Jasper, Timothy is still able to make a connection with the man he loved for 18 years: "Tea with honey was the last thing I gave to the man who was my life" (317). Even after Jasper's death, the taste and aroma of certain foods still evokes his memory: "it is impossible for me now to bite into a piece of anything that has been cooked with the smallest flourish of excellence. . . without having at once a thought of Jasper" (88).

In McGehee's *Sweetheart*, a particularly memorable dinner actually saves the life of Zero's mother, Edie. At a birthday party in Little Rock's finest hotel for Zero's sister,

> In the center of the lobby is an enormous butter sculpture. . .
> featuring a gigantic lobster, Doll's favorite food, with the words
> HAPPY BIRTHDAY etched on its tail. (123)

Later, when Edie accidentally sails off a hotel balcony while dancing, "flying over the mezzanine rail in midstep" (132), it is the butter sculpture which saves her life. An astonished Zero observes: "Mom has landed smack-dab in the butter sculpture. It seems to have melted somewhat and broken her fall" (133). Trebreh's carefully-plotted death scene finds many of the characters gathered around Trebreh's bed indulging in one last feast. Zero notes: "The picnic basket is a Southerner's dream:

fried chicken, milk gravy, mashed potatoes, turnip greens, cornbread, the works" (190). Trebreh savors this final dinner, knowing "I won't have to live with the indigestion or the gas, and I probably won't be around long enough to throw anything up" (192). In *Borrowed Time*, the narrator Paul prepares meals for Roger to keep his weight up and theorizes:

> a home-cooked meal offers a double dose of magic. At the same time you're making somebody strong again--*eat, eat*--you are providing an anchor and forum for the everyday. (116)

Dinner in the counterliterature, with all its epicurean imagery, provides an opportunity for communion among friends and a forum for the sharing of memories.

Both Coe and McGehee offer romantic and sexual imagery, two other types of sensuous imagery, in the exploration of their subjects' identities. Each author gives the reader a clear glimpse of his ideal evening with the perfect partner. In *Boys Like Us*, Zero frets about all the imperfections in his relationship with Clay, and Clay responds: "'Nothing's perfect, Zero. Can't you see it takes a million imperfections to make one good mistake like you and me?'" (49). Zero has a memorable one-night stand with the drag queen Jesus Las Vegas: "After a very romantic half hour on the couch, we try our luck in bed" (34). Upon his return to Little Rock, he meets Lance at a bar:

> He leads me up to the balcony. We stand in front of a giant air-conditioning vent to cool off. Our bodies fall together like two

parts of the same thing. We start to kiss. And keep kissing. And caressing. (87)

In *Sweetheart*, the busy Zero finally finds his perfect partner in Jeff. Zero never succumbs to the shame or embarrassment of the gay man with AIDS who lived a "promiscuous" past. He finds a kindred spirit in Jeff, who understands "Searching for the moment, not a lifetime" (14). Zero agrees, "After all, a guy only has so many lifetimes to give" (14). From the first time Jeff and Zero make love, both men realize the shared sense of communion goes beyond the physical sensation:

His flesh sinks into mine.

"Comfortable?" he asks.

"Yeah, it's heaven. What a fit!"

"Yeah, it is." (15)

Zero expresses his contentment in dancing with Jeff: "As we move to the beat of the refrain, I rest my head against his shoulder, running my hands up and down the soft of his back" (206).

Sexual imagery is plentiful throughout the AIDS counterliterature, offering an antidote to the erotophobic prevailing representations of AIDS. In *Sweetheart*, near the end of the section entitled "The Pressure of Dreams," Zero and Jeff return from Trebreh's memorial:

We twine around each other like snakes. I don't know where we get the energy, but we end up in the longest, most passionate lovemaking session of our entire career. We collapse in a sweaty,

sticky heap and sleep without dreams. (200)

The sexual act has the power not only to connect two people, but to connect the individual with the surrounding world. As Jeff and Zero cuddle, both groggy after a bath, Zero confesses: "'I love you," I whisper to no one in particular, yet the sentiment is meant for everything my senses can register" (27). In *Such Times*, the sexual act gives Timothy a similar feeling of connection to the world around him:

> There is something just to proximity, to having known a man's body by touch, to loving the forces behind it, the voice that comes out of him, the words he selects . . . (170)

In the wake of Jasper's death, Timothy makes love with an older stranger and concludes afterwards: "if we are not each a little more alive for being together, we are not any deader for it, either. The pleasure this man gave me will last a long time" (307). Despite all the adjustments AIDS forces upon them, Paul and Roger in *Borrowed Time* still find something profound in physical communion: "the burrowed place of holding on, where life was the same as ever, still could release an exhilaration that gathered to a peak" (124). Given the desexualizing nature of the harmful rhetorics of AIDS, the use of sexual imagery may be the most important use of imagery in the counterliterature.

Along with the detailing of specific memories of love, sex, food, and travel, McGehee and Coe are both concerned with the redefining of "community" which is involved in the extension of social space. Each of McGehee's characters has his own distinct voice and each of these individual voices is crucial to the larger

tapestry of voices into which it will be woven. McGehee creates an intertextual community, a community based on inclusion instead of exclusion. His characters are bound together by their experiences, their dreams and, most importantly, by their memories. In *Boys Like Us*, Zero refers to his neighbors, "who have no idea about this thing that has so violently shaken our lives" (6). The McGehee novels present an alternative idea of family in the intricate bonds between the characters, many of whom seem estranged from their biological families. The reader is forced to question what constitutes a family, as well as what gives meaning to life within a community. In *Such Times*, as in McGehee's novels, Jasper and Timothy find the deepest meaning in the sexual pleasures they share, the friends who gather around them, and particularly the dinners they enjoy. This counters the focus, such as we see in the harmful rhetorics, on the course of a disease ravaging an isolated physical body and draining a spirit.

The extension of social space leads into a consideration of the extension of the subject's temporal space. Many literary texts are constructed around the framework of life as a journey towards an ever more "authentic" identity, the "true nature" of the subject or narrator. That is precisely what (and all) David Vernon's "Inside" is about: "I haven't been out of my apartment in three months" (245), the narrator reveals. When he hears about the discovery of a new galaxy, he muses: "Some people's galaxies expand. I feel a jerk and mine moves in closer and tighter. I vote for less space. Concentrate on what you have" (246).

Adam Mars-Jones' "Slim," like Vernon's "Inside," charts the movement of the

HIV-infected subject into an interior space, a space more temporal than physical. Mars-Jones' housebound narrator imagines a ration-book of "outside" moments: "instead of an allowance for the week of butter or cheese or sugar, my coupons say One Hour of Social Life, One Shopping Expedition, One Short Walk" (7). Even if the narrator manages to get back "outside," it won't be the same as he remembers:

> I know when I tear out and spend one of my shopping coupons and go out on to that street, I look like a man walking into a wind tunnel. I can see it in the way people look at me. (13)

In *Borrowed Time*, the world-traveller Cesar declares: "Enough of the world out there" (30). This is in stark contrast to Roger, whom Rand says, "never checked out of the world" (297). This turn inward, away from the physical, the tangible, the "real," is common to much of the AIDS counterliterature. It is a movement towards a place where even the narrator cannot follow, a place where the crisis of representation has no power. The AIDS counterliterature offers this "interior" space as a refuge from harmful rhetorics.

The space "within," which can involve temporal and imaginative dimensions, is often illuminated by memory. More importantly, the subjects move towards a space free of the disease progressively ravaging their bodies. It is a space already achieved by McGehee's ancient Stellrita, who says, "I got no concerns past this porch" (*Sweet* 95). Coe's Timothy recalls the one time he and Jasper made love on a beach:

> I could live for the memory of that one time, for just that one heart-pounding, blood-thumping time with Jasper. It would be worth living for, too. (268)

Coe's narrator, having explored his social and physical spaces, finds the most meaningful temporal space between two people in love. An individual can transcend his physical limitations, especially as illness or disease debilitates him, by leaning on memory. In his article "Once I Had it All," John Clum says:

> To affirm the past is to affirm the power of sexual desire; affirming the foreshortened, uncertain future is to affirm the possibility of love in the face of death. (208)

Timothy asks the reader: "With one memory worth living for, can't every last one of us be somehow ready to die?" (268). Despite his HIV infection, or perhaps because of it, McGehee's Zero says, "I've never felt more alive than I've felt in this last year" (*Sweet* 27).

McGehee's characters find the possibility for the suspension of time in the web of meaningful relationships around them. Speaking with post-mortem wisdom, the five-inch Randy, who may or may not be a figment of Zero's imagination, tells Zero: "'You really wouldn't believe how integral it all is. This world, that. Life, death'" (203). Randy then reveals that Zero and Stellrita are "'almost the same person'" (203). The befuddled Zero asks for clarification and receives the cryptic response, "'Memory and imagination'" (203). This response signals both the respective roles of Stellrita and Zero, as historian and storyteller, or archives and

artworks, and the larger role of memory in bridging life and death. AIDS counterliterature explores ways of suspending the passage of time, if only virtual time, by holding on to memories.

The focus on memory as providing for the reestablishment of social and temporal spaces for the gay man living with AIDS is one of the major functions of the counterliterature. This focus reclaims identity back from harmful representations, which impose their versions of identity or attempt to suppress identity. Identity might best be seen as the authentic "voice" conveyed by a particular discourse or artistic endeavor. Asserting identity means recapturing that voice from the harmful rhetorics which would silence it. Examining the crisis of representation of AIDS in terms of identity means considering how representations of the HIV diseases alter the boundaries of the "private" sphere. AIDS texts often examine how disease can further complicate the search for the self. Focusing on memory means, finally, readdressing the past. The subject may be gone, but his past is selectively highlighted to rebalance the personal history thrown off balance by harmful AIDS representations.

AIDS Rhetorics and Authority

In this chapter, I will examine how the crisis of representation surrounding AIDS frustrates the drive for self-empowerment and leads to a problematic relationship between gay men and authority, be it political, medical, moral, or textual authority. Instead of the recovery of individual identity, the examination of authority considers the place of the individual in relation to his society. Where the reclamation of memory involves the past of the person with AIDS, the drive for self-empowerment is very much grounded in the present, in such manifestations as AIDS activism, the call for increased research and treatment funding, and in changing government policies and reorganizing educational priorities.

The texts I will focus on most closely are Baker's *Tim and Pete*, Coe's *Such Times*, and Monette's *Borrowed Time*, as these best represent the disempowerment in a gay man's life which AIDS representations only exacerbate, and the rhetorical responses literary texts can offer. Each text represents a point on the spectrum between passive acceptance of and raging resistance to the empowered and oppressive authorities, as expressed in mainstream representations, including governmental and legal discourses, mass media representations, and AIDS literature itself, which is my primary focus. Baker responds to the prevailing representations of authority with anger and violence. His character Mikey argues that the use of random, senseless violence sends an unmistakeable message to those in power, "So that [they] could know incomprehensible loss" (229), as the

North American gay community has. Monette considers the spread of AIDS and asks, "Has anything else so tested the medical system and blown all its weakest links?" (83). I hope to prove that the authority being strategically undermined is much greater and more encompassing than simply that of the medical establishment or the government.

As a critical source, I will further examine Watney's *Policing Desire*. Watney attempts to demonstrate the manifestations and consequences of a gay man with AIDS being denied access to the authority which controls the policies and purse-strings of, and the rhetorical responses to, the AIDS epidemic. Watney's attentions are towards the mass media as an oppressive "authority," since the mass media provide the most consistent stream of AIDS representations. Watney says that "The mass media's wilful construction of AIDS as a 'Gay Plague' has perfectly complemented government inaction and already guaranteed the death of thousands of people in Britain by the end of the [1980s]" (135). Building on Watney's argument, I will consider other sources of authority, including the medical establishment and, especially, the "authority" of the author himself. More to the point, I will examine the representations created by these authorities.

I will first define "authority," beginning with the broadest useful understanding of the term, and of where it resides in the gay man's life as well as the texts which attempt to represent that life. "Power" is integral to any definition of authority, the power and right to command and be obeyed. One understanding of authority tends towards the institutional, which empowers certain sites and individuals as

"legitimate" to hold power. This situates power within the state, the church, the medical establishment, and other traditional institutions.

Many gay writers, including many I consider as offering an AIDS counterliterature, refer to authority in terms of sanctioned or "legitimate" moral, legal, political, medical, and economic institutions which naturally tend towards tyranny. As Brian Pronger puts it: "With the threat of AIDS, religion, medicine, and the law may reclaim power over the lives of gay men" (256). Institutional authority can be represented by the power of state institutions (the government, the medical and legal professions) and the ideologies (sets of laws, art, religion) manufactured by and underlying these institutions. The intimate relationship between institutional and ideological authority needs further consideration.

Ideology encompasses all manner of cultural "texts," including social protocol, prevailing mythologies--nationalism, "rugged individualism," "the family," Sontag's "imagining foreignness" [3]--and discourse, which includes sets of imagery within a text. My focus is on rhetorical strategies, of which patterns of imagery form an important subset. It may be that ideology mediates between institutional and "textual" versions of authority, or between social and individual realms of "power." Where institutional authority is generally collective or social, textual (or narratorial, or imaginative) authority is more personal. In *Reports from the Holocaust*, his collection of speeches, letters, and essays, activist Larry Kramer rails against the shared sense of powerlessness many gay men feel:

> Your voice is your power! Your collective voices! Your group

> power! Your names all strung together on one long list is your power. Your bank accounts are your power. . . Your bodies are your power, your *living* bodies all strung together in one long line that reaches across this country and could reach to the moon if we only let it. (165)

Kramer seeks to blur the boundaries between individual and collective power, to reconsider possible sources of strength for gay men living with AIDS.

Authority lies along a spectrum, with institutional and "textual" definitions of authority at either end. At the one extreme, institutional authority may be understood as a system of checks and measures, encompassing the varied processes and institutions which exert control over the lives of individuals, helping to keep those individuals, as Watney puts it, "always and everywhere subject to state intervention and control" (17). Such a model of authority by its very nature creates resistance and dissidence. In "Refusing the Name," James Jones comments:

> Drug companies and the medical establishment develop new modes of profit and control while activist groups such as ACT UP seek to re-distribute power by creating new processes of social empowerment. (227)

Gay men, especially if they must live with AIDS, often find themselves at odds with the institutional type of authority. The dual marginalization of being gay and living with AIDS often forces the gay man to redefine authority or attempt to

locate it elsewhere, or even to create his own "images of strength," (165) as Sennett labels the representations which convey "power" in our society.

The "textual" model of authority is more conciliatory and malleable. In his book *Authority*, Richard Sennett discusses authority as "a process of interpreting power" (20), the ultimate goal of which is "to convert power into images of strength" (165). This understanding of authority grants much more power to literary texts to affect profound cultural change. Sennett lists "Assurance, superior judgement, the ability to impose discipline, the capacity to inspire fear" (17-18) as some of the defining characteristics of this type of authority. This model is the source of alternative or multiple representations for gay men with AIDS. This sort of authority is unlike institutional authority in that it allows for individual autonomy, which "builds a barrier against the world; once shielded, a person can live as he or she wants" (116). Individual autonomy destabilizes the legitimate sites of power offered by institutional authority. Sennett stresses authority as a process of imagination:

> It is not a thing; it is a search for solidity and security in the strength of others which will seem to be like a thing. To believe the search can be consummated is truly an illusion, and a dangerous one. (197)

Activism, education, and the artistic enterprise have much greater roles in the "textual" understanding of authority, which reevaluates the worth of opposing, overlapping, or multiple points of view.

Disempowerment

Examining the crisis of representation with respect to authority means considering how the images offered by institutional authority serve to disempower gay men with AIDS. The crisis of representation robs the person living with AIDS of authority over his or her own life, affects important medical decisions and crucial governmental policies, the allocation of AIDS research and treatment monies, and discourages the best possible AIDS education for today's, and tomorrow's, youth. Mainstream representations of AIDS place the person with AIDS under the power of institutionalized authority. The individual can be progressively lost in the needs and directions of his culture's institutions. Because authority is, as Sennett tells us, "an attempt to interpret the conditions of power, to give the conditions of control and influence a meaning by defining an image of strength" (19), representations of authority necessarily involve conscious rhetorical choices by an "author," be it politician, cleric, doctor, or writer functioning in this capacity.

The crisis of representation engages an array of rhetorical strategies, such as characterization, setting, tone, and especially point of view, to deny gay men with AIDS access to their own images of strength. To begin with characterization, mainstream representations of AIDS often work against characterization, making the subject faceless and powerless. An *Edmonton Journal* article, "AIDS Drugs

Boost Risky Behavior," quotes four different doctors but, significantly, not a single gay man with AIDS in its assertion: "The hype about potent new treatments for HIV is leading the public to think AIDS is being beaten--and leading some people to think they can have sex without infecting their partners" (A10). The article neglects to interview a single member of the "people" (as distinct from "the public") it alludes to in the title of the article. The article, again significantly, fails to own up to its own culpability in spreading "the hype" about new drug therapies.[4]

Callwood tells her readers, more than halfway through the course of her supposedly nonfictional *Jim*, "Out of concern for [Jim's] father, the family name has been changed in this book, along with other identifying details" (240). Callwood announces this fact nonchalantly, almost as an aside, yet her strategy depersonalizes and effectively disempowers her title character. Watney opens *Policing Desire* with the event which triggered the writing of the book, the death of his friend Bruno. He describes the twin debilitations of disease and harmful representation and then reveals:

> My friend was not called Bruno. His father asked me not to use his real name. And so the anonymity is complete. The garrulous babble of commentary on AIDS constructs yet another "victim." (8)

To paraphrase James Baldwin's oft-quoted maxim, the victim who isn't allowed to articulate his position as victim poses no threat to the prevailing authority.

Mainstream representations provide specific settings for the sites of real

"power." Setting, in the broadest sense, encompasses the issue of nationalism. In the harmful representations, for instance, authority is often represented in terms of the nation as an empowered "institution." Shilts' text opens with the American bicentennial celebration in the New York harbor: "From all over the world they came to New York" (3). He cites the equatorial origins of the Ebola virus and says, "A site just a bit closer to regional crossroads could have unleashed a horrible plague" (5). Many of the AIDS texts stress the issue of nationalism. There are numerous reasons why gay men have a particular estrangement from any conception of national or state identity. As with any disenfranchised minority, their disconnection from sources of institutional authority loosens the bond gay men have to the national consciousness. Barriers to participation in national life, whether on the political stage or the economic hierarchy, undermine the sense of belonging to the national fabric. Among numerous other reasons, loyalty to state has historically arisen as a consequence of the opportunities the state provides. When the state limits the opportunities and benefits of membership, loyalty becomes increasingly precarious. Gay men, especially when they must live with AIDS, share this experience with other marginalized groups.

Unlike other marginalized groups which have structures of support to fall back on (like the Jehovah's Witnesses of 1940s Quebec or the Hutterites in Western Canada for decades), sexual minorities lack established support structures in immediate proximity. Kramer asks: "Can Jews imagine being hated *by their parents* for their Jewishness?" (232). It is ironic, then, that personal identification

with the nation and nationality are entwined with identification within the biological family. The myth of "the family" provides a model for citizenship, religious devotion, and the economic hierarchy. It is also, as Watney says,

> a myth which fails miserably to do justice either to the actualities of parenting, or to any of the multitude of sexual and erotic bonds which exist independently of child-bearing, for women and men and young people alike. (148)

Two elements, particularly in Canada, which underlie the conception of the nation are family and ethnicity. Social policy is often geared towards the Canadian "family"--a rhetorical structure (and cultural myth) which explicitly excludes gay men. Callwood details the emptiness of Jim's life outside of the family circle: "When they are cool, or distance themselves entirely, he suffers greatly" (28). Callwood uses so much of her text detailing Jim's familial relations, as opposed to his fellowship with other gay men, her focus is ultimately on Jim's failure as a "family" man. Gay men are frequently disconnected from their succession in the extended family and, by extension, from notions of ethnicity. In the framework of the Canadian cultural mosaic, such disconnection from ethnicity further undermines connection to national identity. Monette recalls:

> The Sunday of [suramin] Dose 5 was a national holiday in the people's republic of West Hollywood. The kickoff to Gay Pride Week was a parade, which marked here as elsewhere the anniversary of the insurrection at the Stonewall Inn. (141)

Lapierre offers a less sympathetic viewpoint: "To celebrate their liberation, the American gays had even gone as far as inventing gay holidays" (46). As gay men look beyond the institutional (traditional) sources of support and connection-- family and ethnicity-- immediate geographical locality, as in city or state, also dwindle in significance.

In many mass media representations of AIDS, the sites of power are often in the scientific laboratory or in the hospital. The mass media often serve to provide a voice for institutional authority, even explaining or legitimizing representations created by these institutions. Much of Shilts' and Lapierre's narratives are set in either the laboratory or within the hospital. Lapierre talks about the search for effective antivirals: "The answer would could from the test tubes at Bethesda" (282). On the link between gay men and intravenous drug-users with AIDS, he comments: "If the slaves of hard drugs were a class apart in the confines of St. Clare's [hospital], survivors of the bathhouses did not always get away without similar urges for their fix" (317). This passage, along with many others like it, demonstrates the ease with which Lapierre medicalizes gay sex, with Randy, "the former inmate of Sing Sing" eventually occupying the same space as the "hypersexual gay men" (317) affected by AIDS. Describing the continuing efforts of the scandal-dogged Dr. Robert Gallo, Lapierre says: "At the end of 1986, the controversial virologist's laboratory discovered a new family of the herpes virus, another disease born of sexual liberation" (384). In his acknowledgements at the end of his book, Lapierre says: "A large proportion of my research was conducted

at the Pasteur Institute in Paris and in several Paris hospitals" (392). The most sympathetic characters in *Beyond Love* are not the people suffering from illness, debilitation, or imminent death, but the care-givers and scientists of whom Josef Stein says, with his dying breath: "'There can be no greater love than yours'" (379).

Shilts, like Lapierre, sets the greatest portion of his narrative within the hospital or the laboratory. Like *Beyond Love*, *And The Band Played On* ends in a hospital, with the death of one of the most sympathetic characters. Part of the machinery of the medical establishment is to represent itself as the only source of healing. This medical paternalism can place obstacles in the HIV-infected man's path to the best possible care. When Callwood's Jim initially sees his doctor about his chronic fatigue, "'You're probably partying too much,' the doctor assured him" (9). Mars-Jones toys with medical paternalism and the familiar hospital-bed scene: "Whenever they try to protect me, I hear the little wheels on the bottom of the screens they put around you in a ward when you're really bad" (3). "Bad" in this instance refers both to "ill" and "mischievous," with connotations of "sinful." The more important use of setting, for Shilts, is in his use of symbolic settings, such as his "Beaches of the Dispossessed" (25). I will consider the apocalyptic beach and other symbolic settings in the subsequent chapter.

In Lapierre's and Shilts' texts, as well as many mass media representations, the use of setting exposes the larger problem of medical and scientific paternalism. Many AIDS narratives presume an ongoing trust in the empowered authorities.

Shilts argues that the 1982 Tylenol poisonings demonstrated

> how the government could spring into action, issue warnings, change regulations, and spend money, lots of money, when they thought the lives of Americans were at stake. (191)

By the time the Tylenol poisoning counted its seventh and final death, Shilts records, 260 Americans had already died of AIDS. As James Jones says in "The Plague and Its Texts," "The American reaction to AIDS has been directed by a belief that education and science can provide answers to the dilemma which the virus poses" (73). This representation, or "belief," has repeatedly foreclosed on the possibility of locating sites of power elsewhere.

The tone maintained throughout many mainstream representations of AIDS is one of calm detachment, reassurance, and self-confidence. Readers of *Time*'s "Invincible AIDS" 1992 cover story are assured that, despite the grim picture AIDS statistics present, "The Pasteur Institute is currently testing a promising new AIDS vaccine" (22). In the second decade of the AIDS crisis, few of these "promising" drugs live up to their potential. Detachment also characterizes the tone of mainstream representations. In his obituary of Randy Shilts in *The New York Times* (reprinted in *The Edmonton Journal*), William Grimes maintains an air of detachment: "Shilts did not always please all homosexuals with his reporting" (A6). It would be difficult to imagine the same thing said about a heterosexual reporter, attempting a consensus among "all" heterosexuals. Grimes takes the heterosexuality of his readership for granted, even glossing the term

"outing." Callwood refers to an article on Jim in the *Toronto Star* and says:

> On the same page was an article from San Francisco by the *Star*'s Lynda Hurst. It began, "The AIDS epidemic is killing homosexuals in this city at an average monthly rate of 40." (233)

By taking for granted the heterosexuality of their readers, mainstream AIDS texts, whether in the mass media or popular literature, preclude the possibility of the reader meaningfully "finding himself" in the text. Tone, whether reassuring, detached, or unashamedly indifferent, is an important aspect of the point of view which facilitates this non-identification.

The point of view the mass media portray themselves as adopting is impartial, objective, and honest. The perspective such a point of view offers is one of unity and cohesion. Much AIDS literature recognizes the role of the mass media, which offers a collective point of view for a society, in shaping public perceptions of the HIV diseases. Watney discusses the overly-narrow focus of the mass media in their attempts to represent all the intricacies of AIDS:

> What so distinguishes the [mass media] treatment of AIDS has been the constant inability to offer any possibility of identification with the vast majority of those most closely affected by the illness. (86)

Roger Myrick identifies two strategies—misinformation and silence—common in discourses of institutional authority:

> mainstream representations of AIDS and gays in medical, media,

> and governmental discourse [have] sought to remedicalize homosexuality, both through communication that presented itself as educative and informational, and through silence. (41)

Mainstream AIDS representations often neglect the needs of gay men with AIDS, making AIDS a non-issue unless or until it threatens the "general public." This perception has been little affected by the rampant spread of HIV in the general population of many third-world nations. The "Invincible AIDS" *Time* article, for example, glumly charts the movement of the epidemic "in ever more dangerous demographic directions" (22), referring to a projected increase in heterosexual transmission in North America. The article begins with the usual bombastic military language:

> Wars are usually launched with the promise of a quick victory, with trumpets primed never to sound retreat. And the campaign against AIDS was no exception. (18)

Articles like this helped ensure that there would likewise be "no exception" to the offering of one unified, determinedly heterosexist, point of view in the mainstream.

In terms of AIDS literature, Shilts' narrator adopts an omniscient and objective voice in examining the culpability of the empowered authorities to respond quickly and decisively from early on in the epidemic. Both he and Larry Kramer quote Dr. Mathilde Krim, one of the co-founders of AMFAR (the American Foundation for AIDS Research):

> This is an epidemic that could have been contained. Everything about this epidemic has been utterly predictable, from the very beginning, from the very first day. But no one would listen. There are many people who knew exactly what was happening, what would happen and has happened, but no one of any importance would listen. (Kramer 258)

For all of his anger towards the empowered institutional authorities, Shilts' political agenda in *And The Band Played On* lacks the vitriolic radicalism of David Feinberg, Larry Kramer, or James Robert Baker. Shilts is ultimately content to villify the American government along with his infamous Patient Zero. Shilts discusses the way AIDS has undermined the authority of the medical establishment, but he fails to provide his vision of an alternative source of authority. His point of view throughout *And The Band Played On* remains that of the fair, disinterested, and objective journalist.

Like Shilts, Callwood and Lapierre never bother to consider their privileged, detached perspectives which make their narrators, relative to Monette's, Coe's, or Baker's, passive observers. In this way, they are like Buddy in Adam Mars-Jones' "Slim," "an ambulance-chaser condemned always to follow on foot, watching as the blue lights fade in the distance" (13). A detached, "objective" point of view works, with the refusal of characterization, the use of limited, sanctioned settings, and an emotionally-levelling tone, to ensure the prevalence of institutional models of authority in AIDS representations.

The authorities invested with power have failed to adequately address the complexities of the AIDS crisis and these authorities and their institutions are set up in a way which precludes the possibility of alternative sources of authority. An over-reliance on mass media representations, medical paternalism, the foreclosure of identification with the person with AIDS, and blind faith in the empowered institutions of our society are symptoms of the AIDS representational crisis. All of these responses subvert Sennett's "true goal" of authority, the conversion of power into "images of strength" (165). Myrick, along with Watney, argues that mainstream representations of AIDS strive to offer a unified and cohesive voice, which the AIDS counterliterature writers must respond to, by offering their own cohesive representations.

Reclaiming Power

If the harmful AIDS representations favor the narrow parameters of institutional authority, then rhetorical strategies which heal the crisis of representation must privilege a more "textual" or imaginative version of authority. AIDS counterliterature must strive to be self-empowering, and to present multiple or alternative sources of authority. The AIDS counterliterature, which I represent here by Baker's *Tim and Pete*, Coe's *Such Times*, and Monette's *Borrowed Time*, addresses the crisis of representation by attempting to reclaim authority for the gay man living with AIDS. The counterliterature reclaims authority by transcribing its

own images of strength. Rhetorical strategies can both challenge institutional authority and rewrite images of strength in our culture. These strategies include the use of characterization, setting, tone, and point of view to offer textual representations of empowerment.

Beginning with characterization, Baker and Monette use characterization to explore the anger which stems from being denied access to self-empowerment. Many of Baker's characters are already angry and violent from the beginning of the text. Tim watches George Bush address a crowd on CNN and muses:

> Thought of "the giggle factor," Bush's admission in '87 that there was still a "giggle factor" in the administration concerning AIDS. Imagined cutting off Barbara Bush's head with a chain saw, setting it on a stake. I'd giggle at *that*. (9-10)

When Tim rejects the advances of the unctuous Victor, Victor has a tirade:

> "Who the *hell* do you think you are! Goddamn little tease! Parading around here bare-chested, drying your hair! You can't do this to me! I don't know who you think you're dealing with!" (21)

Pete's first words to Tim, his ex-lover, are "'What the fuck are you doing here?'" (26). When Pete walks in on his mother having sex with the obnoxious Republican congressman Gerald Bryer, a violent fight ensues, and even Tim yearns "to smash his skull in, for example, with that Remington bronze statuette on his desk" (43). As Pete begins to berate his mother, the congressman responds: "'*Look here!*. . . I don't know who the *hell* you think you are--'" (43). Seemingly

everyone in Baker's text is angry, but the characterization is grounded in the way each character responds to this anger. Tim, for instance, wonders why "there hadn't been any AIDS kamikazes yet" (180). He later meets just such an individual, the sociopathic Glenn, whose credo is "Passive genocide earns active retribution" (213). Glenn's vengeful militancy, while reasonable in light of his own experiences, becomes mere misdirected fury without an accompanying sense of the urgency of healing. Tim finally poses Glenn the question: "Is that the kind of world you want to live in?" (214).

Monette's narrator is initially calm and contemplative but grows progressively angrier as the narrative unfolds. *Borrowed Time* opens with:

> I don't know if I will live to finish this. Doubtless there's a streak of self-importance in such an assertion, but who's counting? Maybe it's just that I've watched too many sicken in a month and die by Christmas, so that a fatal sort of realism comforts me more than magic. (1)

The momentum of Monette's anger swells throughout the work, predominantly through the author's use of military language. As Roger's condition worsens, so Monette's anger and desperation increase:

> The last straw was the Saturday dose, administered by a rattled male nurse who injected 2.5 cc instead of 2.0. Roger gritted his teeth against the pain as I ran out to Thrifty to buy a heating pad. It was not the last time I wanted to open up with an Uzi in the long

line at a drugstore. (97)

Of his turbulent relationship with Roger's brother, Paul says at one point, "My rage and contempt toward him were boundless all that week" (262). Midway through *Borrowed Time*, Paul's rage begins to coalesce into activism: "I want to tap into the rage of the positives so we can throw buckets of sheep's blood on the White House lawn and spit in the faces of the cops with yellow gloves" (165). When his anger subsides as the text closes, it is partly because the author is overtaken by his despair at Roger's death, but also because some of his anger has been rechannelled into activism.

The characterization of Monette's Paul--angry, rash, emotional--is diametrically opposed to the calm, measured cool of Roger. This opposition is signalled throughout the text. Where, for example, Roger has "a constitutional aversion to hypochondria," the narrator Paul calls himself "a textbook hypochondriac" (3). Where Roger "was comfortable with relative monogamy," the narrator "would go after a sexual encounter as if it were an ice cream cone--casual, quick, good-bye" (5). Paul is wildly emotional, while Roger is cool, stoic, and rational. Sometimes the opposition creates friction, as when Paul alludes to the "clash of my volatility and his closing off" (233). Faced with permanent blindness, Roger remains "brave and resourceful, stubborn and gallant" (264), in spite of his lover's fear and panic. Roger is recalled by his grieving lover as "the most completely unpretentious man I ever met" (9).

Paul's closest friend is Cesar Albini, "possessed of a great heart and

inexhaustible energy" (6). If Paul and Roger learn to adjust to the demands of their declining health, Cesar's reaction often seems one of denial. Monette recalls, prior to Cesar's diagnosis:

> "We're not going to die young," Cesar used to say with a wag of his finger, his black Latin eyes dancing. "We won't get out of it *that* easily. (8)

Cesar, whom Monette says "wasn't lucky in matters of the heart" (7), meets his ideal partner shortly before his death. When the relationship seems to be progressing too slowly, Cesar becomes indignant: "'It's now or never. . . I need a little commitment here!'" (167). In one of their last telephone conversations, Cesar tells Paul, "'You keep the pool open. I'm coming down for that swim'" (193). Monette sums up his three central characters thus:

> Roger, Cesar, and I: the Chicago Jew, the Uruguayan lapsed RC and the hollowed-out Episcopalian lost at Delphi. (42)

Characterization ultimately serves to chronicle the progression of AIDS in Monette's text, as well as the author's deepening commitment to AIDS activism and education. Cesar and Roger were both seasoned travellers, as Paul calls Roger "he who had such a hunger to be out in the world" (264). As the once-expansive horizons of these two men narrow, so Paul learns to scale down his expectations and focus on more meaningful, more "interior" spaces.

The readers of these texts are thus presented, through characterization, with a wide range of responses to AIDS and empowerment. Baker's and Monette's anger

and frustration exposes the powerlessness many gay men feel, especially gay men with AIDS, in attempting to communicate their needs or meeting these needs with the available resources. In *Tim and Pete*, Glenn discusses the limitations of the artistic enterprise:

> The depressingly chickenshit truth comes out. Art as catharsis. Art as therapy. Give the mental patient some clay. Let him make an ashtray. Well, I like your ashtray. . . Let me pick it up and use it to batter in Ronald Reagan's skull and dig out his brains with my fingers and throw them in his wife's face. (221)

Baker's and Monette's angry characterizations suggest the need for anger to be constructively channelled, such as into activism. Kramer reminds us that many gay men with AIDS have much greater power than they realize:

> If one is poor, black, and uneducated, there are very good reasons why fighting is difficult. If one is economically comfortable, gay, and educated, these reasons evaporate. (261-62)

Lest we think for a moment that Kramer was ever paralyzed by his anger, it bears remembering that he helped found the Gay Men's Health Crisis (GMHC) and the AIDS Coalition to Unleash Power (ACT UP). In his forward to Kramer's *Reports from the Holocaust*, Simon Watney says,

> Nobody has written with greater passion of the American AIDS epidemic, and nobody has done more to help gay men take the threat of HIV infection seriously, especially in the long years

> before the discovery of the virus. Nor has anyone done more to draw public attention to the continuing scandal of official US government neglect and the mismanagement of a health crisis that has already claimed more than a hundred thousand lives in the United States alone. (xv)

Another rhetorical strategy is the use of setting, with the focus directed away from the nation, the hospital, laboratory, or pharmacy and instead on the home, the bedroom, a hidden beach or some similarly private space. Often setting contributes to the delineation of community. In mainstream representations, gay men with AIDS are excluded from "family" and national connections. The counterliterature often attempts to represent an alternative notion of "family." The men in many of these texts are not failed family-men, but are often shown as crowded by a family of friends. Instead of a community of exiles, Monette finds solidarity in

> a community of the stricken who would not lie down and die. All together, we beat down the doors of the system and made it take our count. . . It could be argued that we're mainly out there for ourselves, of course, and the ones we cannot live without. But on the way we have also become traders and explorers, passing the word till hope is kindled in places so dark you can't see your hand in front of your eyes. (103)

Monette offers a family based not on biology, but on shared experience and hope,

as well as mutual support and loyalty.

In the counterliterature, shared experiences--the common points of shared sexual experience and social interaction, as well as the shared experience of exclusion--act as powerful sources of connection between gay men across national boundaries. It is not difficult to understand that there could be greater similarities in the lives and social experiences of gay men with HIV in Saskatchewan and Arkansas, than between a gay man in Toronto and heterosexual MP in Ottawa. Recalling one of Roger's clinical researchers, Peter Wolfe, Monette records: "We shared with Peter a common geography of the mind, which only by chance happened to have the Charles River meandering through it" (128). For reasons of shared language and similarities in cultural experience, the transnational identity of gay men is strongest among residents of the English-speaking countries, including Canada, the USA, and the UK. The transnational mass media, and the exponential growth of international travel and communications which typify the late 20th century, further facilitates these shared experiences, often by exclusion, and a transnational gay identity.

There is an obvious similarity between the transnational identity of gay men and a similar transnationalism arising in Jewish culture in Europe and North America since the Jewish diaspora. As we have seen, in centuries of Jewish history, oppressed communities of Jews came together to support themselves and look towards other Jewish communities from within and outside of arbitrary (and culturally-irrelevant) national boundaries. Shared experiences of oppression, from

the Jewish expulsion from England to Eastern Europe's pogroms, often have a far greater relevance to one's personal consciousness than national identity.

The AIDS counterliterature frequently attempts to gather together its dispersed and disenfranchised members. In "Ties," Andrew Holleran's narrator reflects, at a funeral: "This is not the reason we gather together. We get together for parties, for beaches, for dinner, for fun" (214). This is also true of gay readers, who "converge" in a text to celebrate the lives of gay men, not just to mourn their dead. The movement detailed by AIDS counterliterature is often towards a more personal, even more symbolic, setting. While I will be dealing with setting in greater detail in the next chapter, I consider setting in this chapter as one more element with potential for self-empowerment.

Prior to his AIDS diagnosis, Roger had traveled extensively. The last nineteen months of his life moves the setting of his "story" predominantly into the hospital or sick-bed. When a pair of doctors informs Roger of his pneumocystis diagnosis, Paul and Roger cling together in a "liturgy of bonding" (77). Paul recalls: "Mostly we clung together, as if time still had the decency to stop when we were entwined. After all, the world was right here in this room." (77)

Monette deliberately searches for sacred spaces between two people who love one another. He says: "So long as you are together, foxhole or detention camp, you make yourself a corner and make it work" (89). Monette creates this emotional "space" to ground his characters before all the tests and hospitalizations that await Roger later in the narrative.

Monette and Baker, like many of the AIDS writers, use tone (anger, frustration, fear) to convey the urgency of their struggles. In the opening paragraph of *Tim and Pete*, Tim dreams of a reunion with his ex, and "even though we were both angry, I could tell we still loved each other" (7). The challenge for Baker is, having acknowledged this anger, to use the anger constructively. Baker's narrator sees little problem in responding with violence to the daily injustices meted out on gay men. By the end of *Tim and Pete*, the reader better understands the rationale for such a response, if not the value of it. The anger of the gay men in Baker's text matches the indifference or the thinly-veiled contempt of the conservative authorities who perceive an AIDS-related death as "One less queer givin' AIDS to innocent people" (253).[5] It is significant, however, that the title characters' anger erodes as they rediscover their love for one another.

Coe's tone is passive and detached throughout *Such Times*. Recalling Jasper's demise, Timothy recalls:

> Jasper lost, in pretty much this order, his youthfulness, his energy, all taste for wine, his appetite, his ability to swallow solid food, sixty-eight pounds, his ability to focus on a topic, his verbal flourishes, his sardonic stance, his ability to walk unassisted, steady breathing, and, I think, his will to live (16-17).

Having provided this list, Timothy revises it: "Actually, that's wrong. His will to live was the first thing Jasper lost" (17). There are no angry outbursts of temper or violence in *Such Times*. When Timothy and Jasper have a disagreement over

Jasper's large sexual appetite, Timothy hurls a glass to the ground: "I heard it smash against the pier, a good smash, but the satisfaction, the relief I'd hoped for, I didn't get" (108). Both men remain calm and restrained throughout their discussion. Of this one disagreement, Timothy concludes: "I said what I said, Jasper said what he said, and neither of us came round to the other" (111). The narrator in Mars-Jones' "Slim" attempts an unemotional stance throughout the text, refusing to use the term "AIDS." He recalls his hepatitis B vaccination as the moment "when illness came up and asked me what I was doing for the rest of my life" (9).[6]

These strategies all lead to a consideration of point of view. Wayne Booth, in *The Rhetoric of Fiction*, says point of view takes particularities into account, including

> which particular character shall tell this particular story, or part of a story, with what precise degree of reliability, privilege, freedom to comment, and so on. (164)

As such, characterization, setting, and tone are all important in shaping a text's point of view. One of the concerns of point of view is the illusion of objectivity, which becomes almost an obsession for Coe's narrator, and Coe himself, in *Such Times*. Coe offers his characters as objective (which is not to say disinterested) authorities on AIDS. Monette's narrator presumes an alternative authority when the narrator takes on the role of educator, stepping outside of his narrative to relate more accurate information about AIDS.

Point of view is expressed in the delineation or blurring of the fact-fiction boundary. Coe's narrator foregrounds a deliberate rhetorical strategy by continually questioning the fact-fiction dichotomy. The qualities we generally associate with authority often include a degree of objectivity. In his essay "Refusing the Name," James Jones says, "In the end, many facts of the epidemic have shown to be merely convenient fictions to describe a threatening reality/morality" (228). As Sennett says, "A legitimate personal authority is perceived as able to do two things: judge and reassure" (154). The ability to effectively perform these two tasks depends on an illusion, even if only an illusion, of superiority. Point of view, then, is used both to expand the range of voices which offer an "authoritative" text, which significantly includes fiction, and to offer the personal view as a source of more accurate information.

If readers discount the value of truths found in fiction, deferring to the apparent objectivity of scientific facts and statistics, the weaver of fiction is in a precarious position as an authority on AIDS. Robert Franke, in his article "Beyond Good Doctor, Bad Doctor," claims that "It is in fiction that a society talks most frankly to itself" (94). In "The Way We Write Now," Sharon Oard Warner admits:

> What I know about AIDS--about living with it and dying from it--I have learned from literature, from novels and poems and essays, and most of all, from short stories. (491)

Writers of the AIDS counterliterature choose fiction to convey more accurate facts about AIDS and HIV, to correct the fallacious "nonfiction" of mainstream

representations. The greatest example of mass media misrepresentation of the AIDS crisis is "the AIDS virus," the conflation of infection and syndrome. Contrary to what the media irresponsibly continue to report, more than 15 years after the first reported cases, there is no "AIDS virus." There is only the human immunodeficiency virus (HIV) which impairs the body's ability to respond to the myriad of microorganisms present in our environments and our bodies. Despite recent strides to improve the quality of life for people with AIDS, many uninformed individuals, and the mass media almost without exception, continue to equate HIV infection with imminent death by an AIDS-related illness, and react accordingly to anyone touched by the virus.

The AIDS counterliterature often attempts to correct some of the misinformation about AIDS, acting as its own authority on the subject. Many gay men with AIDS have become more knowledgeable about their ailments than members of the medical establishment but, being outside of the institutional strictures of the medical establishment, their voices are silenced. In the counterliterature, the textual version of authority predominates. The reader is told that the characters in *Such Times* "all know something about medicine now" (19). Timothy demonstrates:

> From Dominic, from Jasper, from here and there, I have learned about reverse transcriptase, T-cells, B-cells, macrophages, pneumocystis carinii, lymphadenopathy, cytomegalovirus, histoplasmosis, toxoplasmosis, mycobacterium avium intracellular,

> now called mycobacterium avium *complex*--because as many as eighteen bacteria can be involved. (19)

In sharp contrast to Timothy's doctors--the dermatologist who says "You get it by being passive," (169) or the health-service doctor who told him "three times that he suspected I was homosexual and had used my body in a way it had not been designed for" (183), Timothy takes it upon himself to educate Jasper about the rudiments of cellular biology and virology. He explains how the virus enters the cytoplasm of an individual human cell:

> "It's almost like an empty space, except it contains an enzyme and a number of proteins, and the virus replicates within it. Researchers are still isolating proteins, and no one knows what all of them do." (212)

Timothy tries to provide Jasper with as many facts about AIDS as possible "to give him hope" (213).

Monette also positions himself as an authority on AIDS and HIV. Starting from complete ignorance about AIDS, Monette is able to relate very specific information:

> Any change, any slight modification. . . even a bruise you remembered the impact of, you'd watch like an x-ray till it started turning yellow around the purple. KS lesions do not go yellow. They also do not go white if you press them hard with your thumb. (32)

From the moment of Roger's diagnosis, Monette immerses himself in all that is known about AIDS:

> Together Roger and I became postgraduate students of the condition. No explanation was too technical for me to follow, even if it took a string of phone calls to every connection I had. . . Day by day the hard knowledge and raw data evolved into a language of discourse. (92)

Monette, who spent his twenties as an educator, continues to educate his readers about AIDS. Where institutional authority pretends to have the monopoly on AIDS information, the textual authority of Monette (and Coe) is formidable. Monette says, "Eventually the interns had more to learn from us than we from them, for we had a data base larger than theirs" (92). In his article for the *GMHC Newsletter*, Kramer says:

> If we don't field our own experts, representing *us*, fighting for *us*, there is no telling what will happen to us as more and more pressure is brought to bear on officials to "find an answer" and who then might take the path of least resistance and scapegoat gay men. (27)

For both Kramer and Monette, activism and education are important tools to reshape existing institutions. Asserting his own authority on AIDS gives Monette hope that he can survive the indifference of the medical establishment as embodied in his "Ferrari doctor": "What was I doing still seeing this man? It was

almost a kind of paralysis, as if I didn't deserve any better than his indifference" (135). Abandoning this doctor helps galvanize Monette's commitment to activism.

All of these rhetorical strategies--characterization, setting, tone, and point of view--work to undermine the mainstream representations which privilege institutional authority. Those who are considered the authorities on AIDS control the rhetorics of the HIV diseases and, by extension, the funding and educational implications of this control. When an "authority" mutates into a hegemony, the search for alternative sources of authority must be encouraged. Many of the works of the AIDS counterliterature focus on the search for alternative sources of authority, whether in the angry and militant activism of Baker, Kramer, and Feinberg, or the focus on more accurate cultural representations about AIDS, such as we see in Monette's, Coe's, Schecter's, and Watney's works. Monette finds strength in the solidarity of those who would join in Roger's "fight," including Roger's doctors, both men's family members, and many close friends. The AIDS counterliterature offers a multiplicity of textual representations to counter institutional authority.

Authority involves a movement from the purely private into more public space. Texts which hope to address the imbalance between the gay man with AIDS and the authorities which circumscribe his existence present alternative or multiple sources of authority. Identification with the subject, through characterization and reshaping the narrative's point of view, along with activism and education, are strategies of self-empowerment, and alternative sources of authority, offered by

the AIDS counterliterature. Textual authority emphasizes a multiplicity of point of view to counter the narrow, "objective" point of view offered by the mainstream representations and the empowered institutional authorities.

AIDS Rhetorics and History

The focus of this chapter is the crisis of representation as it manifests itself in the writing of history. Every gay man who dies with the closet door shut, and with his AIDS story silenced, contributes to the erasure of gay men from the history of our times. While the stories of gay men have frequently been erased throughout history in numerous ways, this erasure has never seemed more complete and irrevocable than since the advent of AIDS. History is often understood as the recording of catastrophic events and their effects, but AIDS is a qualitatively unique calamity. Sontag calls AIDS "a catastrophe in slow motion" (176). In "AIDS and the Burdens of Historians," Jack Pressman says:

> It will be some time before we have sufficient distance and perspective from which to assess the effects that the sudden loss of a generation of gay citizens will have had on the path of American culture; it is still too early to consider what might have been. (143)

The shape of things to come is very much affected by representations in the present. Monette notes sadly that, compared with the origins of gay history in ancient Greece, "most of the rest of gay history lies in shallow bachelors' graves" (20). Personal testimony, rendered publicly, offers something more penetrating than these shallow graves and their hollow epitaphs.

With AIDS no longer meriting headline space, the offering of testimony is increasingly important in countering the process of erasure and exclusion from

history which gay men with AIDS face. As with any major historical event, understanding AIDS means reconsidering history and the way history is written. Many AIDS narratives attempt to put the crisis in terms which will be intelligible to the greatest numbers of readers, through the use of settings and imagery relating to World War II, the Jewish Holocaust, and the end of the world. There is a crisis of representation in the failure of the prevailing representations to take into account the particularities of the AIDS crisis and the voices of the people most profoundly affected by these representations. Monette cautions: "If everyone doesn't stop and face the calamity. . . then it will claim the millenium for its own" (44-45). As they do in terms of identity and authority, so rhetorical strategies can stake their claim in the writing of history.

My primary texts for this chapter are Monette's *Borrowed Time* and McGehee's *Sweetheart*. Both works attempt to provide a continuity to the lives of their characters beyond the joys and sorrows of their daily lives. The focus of each of these texts is the primacy of testimony in undoing the harmful representations of AIDS. Where memory reclaims the worth of the individual and repersonalizes the subject, involving a focus on the past, and self-empowerment works to make the daily life of the person with AIDS more tolerable, involving a focus on the present, testimony inserts the gay man with AIDS into the history of his culture, which involves a focus, ultimately, on the future. The AIDS counterliterature offers testimony from the persons most deeply affected by AIDS. Testimony is the rendering of memory in the public sphere.

In terms of critical background, I will examine Schecter's *The AIDS Notebooks* and Timothy Murphy's article "Testimony" in appraising the value of personal testimony. Schecter stresses the telling of stories as a means of countering the silence of the grave. He says that stories

> are the signs of converse without which the world collapses into the dumbness of things. Hence the great sadness that AIDS has foreclosed conversation, lent credence to the wicked ideas that the world can dispense with longing and metaphor, that metaphor is forcibly ideology and community forcibly myth, which only individuals in flight from their own solitude refuse to recognize. (150)

For Schecter, the very process of telling a story forestalls the silencing which runs much deeper than simply the death of the individual. Murphy examines how testimony helps rewrite representations about AIDS to offer "hope that one's struggle with AIDS will help spare others in the future" (315). Or as Zero's mother tells her son, "your writing could do something for you someday" (*Boys* 79). Zero's testimony (like McGehee's text) is all that stands between his "self" and oblivion.

Historiography, far from being one monolithic process, falls along a spectrum represented, at the one end, by "monumental" history and, at the other, by "imaginative" history. Monumental history, whatever else it entails, is a recording and extrapolation of events held in common by a society, a common intuition of

cultural movements and patterns. As such, it relies (like institutional authority) on presenting a point of view which appears objective and impartial. This monumental kind of history is a validation and ordering of "important" events in political, socio-economic, scientific, and technological spheres of influence, within settings appropriate to these spheres. It is difficult for a single individual, especially if the individual is outside of these spheres of influence, to have a significant impact on this model of history. Monumental history is seen as the testament of a culture, not the testimony of individuals. Monumental views of history rely, as with institutional authority, on a facade of objectivity and impersonality.

My focus, however, is more directed towards an "imaginative" historiography, which more pointedly addresses the spectrum of socio-historical elements determining which details and images are added to "history." This necessarily involves a deeper consideration of the person doing the actual recording. As Jack Pressman says in his article "AIDS and the Burdens of Historians," "the historian too is caught within this larger, complex process by which knowledge and society interact" (143). Whereas historians who render monumental history adopt a disinterested pose, the same cannot often be said for those historians rendering "imaginative" history. As Kramer says, "I can only go on writing what I write, if not as an artist, then perhaps as a historian" (148). However history is perceived, the boundary between artist and historian is often difficult to ascertain.

The rendering of history is a conscious selection of details by an individual

(politician, historian, novelist) with a particular agenda or directive. The historian must at least pretend to speak either on behalf of his society or counter to the views of that society, an issue of point of view. Like the spectrum of "authority," so too "history" is an imaginative enterprise, an ideological construct. In *What is History?*, E. H. Carr says that "Society with a big S is as misleading a fallacy as History with a big H" (83). No useful conceptions of history presume total and unfailing objectivity or consistency. Carr says that objectivity in history "cannot be an objectivity of fact, but only of relation, of the relation between fact and interpretation, between past, present, and future" (159).

Sontag distinguishes the "real" event and the image (perception, interpretation) of that event:

> as real events often seem to have no more reality for people than images, and to need the confirmation of their images, so our reaction to events in the present seeks confirmation in a mental outline, with appropriate computations, of the event in its projected, ultimate form. (177)

A fuller understanding of history must consider the life of the individual in terms of the tensions between past, present, and future, between the real and the imaginary, between a fact and its interpretation--but also all the socio-historical phenomena which influence these tensions. Including imaginative history in the process of historiography offers the hope, says Jack Pressman, "that the emerging historical lessons will be a basis for future action" (138).

Erasure from History

I will first focus on how the crisis of representation shapes the writing of history in our times, and on how the story of AIDS is handed down to posterity. The crisis of representation reflects the adoption of the monumental model of history to the degree that mainstream "historians," including writers functioning in this capacity, offer unsympathetic representations, or even withhold representation, of gay men with AIDS. While we may be too close to the process to fully comprehend the degree to which gay men with AIDS are being actively erased from history, the erasure is evident in the protective secrecy of friends and family. As David tells Zero in *Sweetheart*:

> "I just loathe how we've been robbed of our future. Every day another one of us disappears. Remember Rob Reynolds? I hadn't seen him for months. Then there he was, walking up Church street this morning, completely emaciated and carrying a couple of empty boxes. Packing up his apartment, I suppose. Another one of us crawling off to die." (36)

Monette refers to the conspiracy of silence on a larger scale, outside of the author's immediate circle:

> Michel Foucault the philosopher, this actor, that dancer, all innuendo and secrecy. A distinguished and sweet-tempered producer we knew had been in the hospital for months now, but no,

> it wasn't AIDS. The disappearing had begun. (18)

The conspiracy of silence suggests that being gay, and having AIDS, is worthy of concealment. Michel Foucault, Liberace, Michael Bennett, Perry Ellis, and Roy Cohn all denied on their very deathbeds that the HIV diseases were responsible for their impending deaths.[7] By concealing the cause of their deaths in order to secure their place in monumental history, these men may have helped consign themselves, along with their gay brethren, to the "shallow bachelors' graves" Monette referred to. The medical establishment, the law, the church, and the family often collude with the wishes of some gay men to conceal the real cause of death. As Monette says: "Every gay man I know has stories of married bisexual men who died in the secret enclaves of family, town, church, and local GP, all without saying the 'A' word" (308).

Given the sheer number of people infected worldwide with HIV, the lack of daily coverage by the mass media staggers the imagination. In his 1983 article "2,339 and Counting," Kramer criticizes *The New York Times*:

> This newspaper, which purports to record what is going on here to a population that includes one million gay people, has yet to do one human interest story on AIDS, to profile one patient, to do an in-depth article on GMHC, which represents one of the most amazing grass-roots responses by a community taking care of its own. (70)

Monette recalls:

> The indifference of the press remained deafening; AIDS activists

> like to talk about the occasion when the *New York Times* devoted front-page space to a disease that felled seventeen Lippizaner stallions in Europe, when no story about AIDS had ever appeared on page one. (227)

While headline space is not in itself a guarantee of a place in "history," the refusal to grant this space assures that most people will not realize the gravity of the AIDS crisis. The erasure of gay men with AIDS from public consciousness is a profound abuse of an already marginalized group. Withholding representation means that not only will gay men have less power in dictating "the agenda of the fight" (Monette 227), but that history will record AIDS not as a "war," (to use Monette's phrase) but as little more than a minor skirmish.

Coe titles his work *Such Times* because one of his characters reflects on her libertine life in the 1970s and tells Timothy: "'It's hard to believe there used to be such times'" (5). If the invisibility of AIDS in the mass media continues, future generations will likewise find it hard to imagine the pain and dislocation, as well as the strength and triumph, of gay men in times of AIDS. The mass media have contributed to the invisibility of AIDS, from the lack of leading-story/front-page coverage right down to the sanitization of obituaries.[8] Monumental history denies gay men with AIDS the opportunity to testify, and achieves this purpose by the use of point of view, setting, genre, and patterns of imagery.

Point of view is an important means by which monumental history excludes gay men with AIDS. Callwood, Lapierre, and Shilts all discuss the moral dimensions

of AIDS and the gay "lifestyle," "a word with condescension built into it, a xenophobe's word" (91), as Coe says. Looking at AIDS through a filter of morality necessarily means adopting a pose of superiority over the affected characters. Callwood's Jim asks himself, on tape, "Is a promiscuous gay lifestyle correct? Of course not, but the feelings still exist and will always exist" (197). Callwood's uncritical linking of "promiscuous" with "gay" leaves little room for alternative or more sympathetic representations. Lapierre concedes that, while the majority of gays and lesbians are sexually moderate,

> The same was not true of a small number of young gays overtaken by an explosion of libido that translated itself, throughout the seventies, into a frenzy of revelry and experimentation such as no human society had probably known before. (46)

A 1990 *Newsweek* article, "The Future of Gay America," asks whether gay men should "continue--within the bounds of safe sex-- to have multiple partners or emulate heterosexual monogamy?" (23-24). The phrase "heterosexual monogamy" is offered by the author of this article as a given, almost a redundancy.

Shilts ultimately grounds the spread of AIDS in a single individual, Gaetan Dugas, his "Patient Zero." Not content merely to make Dugas his scapegoat, Shilts progressively recreates Dugas as a criminal and a monster: "At one time, Gaetan had been what every man wanted from gay life; by the time he died, he had become what every man feared" (439). Note the use of "every man," as if even men living a heterosexual "lifestyle" need fear the sexually-predatory Dugas. This

oversimplification undoes whatever rehabilitative work he might have intended and make Shilts one more passive observer, like heterosexist historians or the mass media, recording the history of AIDS on behalf of those living with it and dying from it. Shilts never gives Dugas the opportunity to testify in his defence.

Many mainstream and mass media AIDS narratives contain echoes of monumental views of history. Monumental history, by its very nature, represents and addresses the perceived core of a culture, not its margins. A 1993 *Newsweek* article, "A Lost Generation," quotes *Los Angeles Times* art critic Christopher Knight: "'AIDS is not a gay disease, but because it first showed up in the gay population it's bound up with the gay-rights movement" (19). In "AIDS 101," Peter Bowen argues that cliches like "AIDS is not just a gay disease," or "AIDS is everyone's disease" have become "so widespread [in the Western world] as to cover up the fact that gay men currently still suffer the greatest burdens of the epidemic" (141). Many of the mainstream representations of gay men with AIDS are constructed specifically to preclude the possibility of identification with these men. A 1987 *People* cover story, "AIDS: A Diary of the Plague in America," provides a wealth of details about, for instance, Dr. Michael Gottlieb--who "drives a Jag and dresses like a professor" (63)--but mere faint sketches of most of the men with AIDS in the article. The gay men in the article are shadowy, anonymous and, ultimately, outside of the readers' empathy: Andy, "a hairstylist from Los Angeles" (63), Buddy--"all 85 lbs. of him" (76), and "a 41-year-old oral surgeon from New York whom we shall call Mickey" (63). A 1991 *Newsweek* article,

"Living With the Virus," which estimates that 10 million people are infected worldwide with HIV, closes with the statement: "Magic Johnson is not alone" (64). All of these representations serve, ludicrously, to keep gay men at the margins of an illness which has hit them hardest.

The settings for representations of AIDS are often familiar. Many of the stories document the mythic origins of gay history in ancient Greece, as in the counterliterature *Borrowed Time*, and the final endpoint of that history on a utopian beach, such as in *And The Band Played On* and the film *Longtime Companion*. Many of the AIDS narratives, furthermore, presume a common understanding of history as a catalog of monuments of achievement--economic, military, scientific, or technological--within these prescribed, familiar settings. The most prevalent of these settings include beaches, battlefields, doctor's offices, and scientific laboratories. Beyond being sites of power, these settings become the appropriate arenas for the enactment of monumental history. Beaches also frequently serve as the setting for the spread of AIDS, along with gay bars and baths. This is true in the texts of Shilts, Callwood, and Coe.

A large proportion of Shilts' and Lapierre's narratives take place in these contrasting sets of locations: either at the hospital, the lab, or the doctor's office or, conversely, at the bar, the bath, the beach, or the Castro. I will offer the beach setting as the best illustration of my point. Shilts constructs his beaches as places where gay men could indulge in a "never-ending Fire Island summer party" (25-26) of anonymous sex and immoderate drug-use:

> Afternoons on the beaches were followed by light dinners, perhaps a nap, and then some outrageous party, before adjournment to whatever was the fashionable disco of the season. Of course, nobody got to the Ice Palace before 2:00 A.M., so you'd need some drugs to stay up. (27)

If gay life was one big "summer party," Shilts implies that AIDS signals the end of the party. In "Dante on Fire Island," James Miller criticizes Shilts and others whose rhetorics have led to Fire Island, and all of post-AIDS gay life by extension, being

> imagined as a zone of apocalyptic despair, a nuked prospect of desolate dunes, windswept beachgrass, and bare ruined pines where late the sweet boys cruised. It is the last resort of the Gay Man of Sorrows. (269)

The perception that life for gay men was ever one big "summer party" prior to AIDS is hateful and inaccurate. It also serves to discount the voices of those gay men with AIDS who weren't "in" on the party, the testimonies of ordinary lives facing extraordinary circumstances.

If AIDS for Callwood's Jim ends in the hospital, it begins in the cavernous depth of the gay bar. Callwood reports: "Jim heard in the Mine Shaft that one time a bald man put his head into an anus" (117). Callwood describes, in monstrous imagery worthy of Hieronymus Bosch, some of the actions of the men in the leather bar, who "costume themselves in leather and chains according to the

dictates of fervid imaginations:"

> At the Mine Shaft one night he saw a young blond man tied hand and foot to scaffolding, with a line of men waiting their turn to have sex with him. . . Through a trapdoor in the floor, down a dark stairway, in the basement, he saw worse. . . He heard rumours of orgies that slipped over the edge into such sadistic depravity that people were seriously injured--or killed. (118)

The gay bar, if one believes Jim's/Callwood's vision, is beyond merely nightmarish, it resembles Hell itself. Like Shilts, Callwood is not above the use of third-hand hearsay, which seems ironic for a teller of monumental history. The portrayal of gay life as so radically different from "normal" existence further forecloses on the possibility of identification with the characters in these representations. By consequentially pairing hospital and gay bar, many mainstream representations medicalize homosexuality and show AIDS as the predictable result of gay sex.

Monumental history favors particular genres. Describing Luc Montagnier's discovery of HIV, Lapierre says, "Great scientific epics almost invariably begin in a commonplace way" (193). Such "epics" often have familiar patterns of the high-born hero, the quest, the monsters along the way, and the ultimate triumph over darkness. The "hero," for Lapierre, is science and technology, while the "darkness" is illness and disease. Lapierre and Shilts construct their texts as epic-scale novels which provide episodic glimpses of a large cast of characters facing a

collective calamity. In this way, these texts are more like Camus' *The Plague* than they are like the AIDS counterliterature.

History is presented in harmful representations as excluding personal testimony and focusing instead on these larger symbolic events, such as military campaigns or economic conquests. McGehee's Randy derides "Monumental history" (17) as manifested in the collapse of the USSR: "George Bush and Brian Mulroney will soon be crying, 'Hoo-ray, hoo-ray! Communism is dead. We won, we won!'" (*Sweet* 17). Many gay texts, even prior to AIDS, are constructed as lost civilization/end-of-the-world chronicles. The characters in Armistead Maupin's *Tales of the City*, for example, are all awaiting the cataclysm which will make San Francisco into the New Atlantis. Maupin frequently drops references to a civilization on the verge of collapse. He labels Nob Hill the Mountain of the Flood" (455) and his Mona says, "There's a theory. . . that we are all Atlanteans" (196). In his "Late Victorians" article, Richard Rodriguez comments: "To Atlantis, to Pompeii, to the Pillar of Salt, we add the Golden Gate, not golden at all but rust red. San Francisco toys with the tragic conclusion." (57)
Shilts in particular creates his narrative as the "tragic conclusion" to the sexual revolution. Monumental history limits the genres with which history may be written and, by extension, the persons qualified to relate history.

Representations of AIDS in a monumental understanding of history often invoke familiar patterns of imagery, such as martial imagery. Shilts' *And The Band Played On* is full of World War II imagery, even in the chapter headings he

chooses: "Glory Days," "Enemy Time," "Traitors," "The War." When San Francisco AIDS activist Cleve Jones tells his mother about the death of an ex-lover, Marion Jones recalls her own youth during World War II: "All the boys I knew went off to war and most of them didn't come back. . . The ones who did survive were damaged. That must be what it's like for you." (518)

The important distinction is that gay men are often characterized in mainstream representations as "damaged," in many respects, even before their HIV infection. Shilts considers the World War II parallel, but then decides AIDS is more like terrorism: "There was a terrifying amorality to the epidemic that went far beyond the articulated ideologies that clashed in war" (518). Lapierre, detailing the search for HIV, says "war was already being waged between French and American scientists" (244). Researcher Robert Gallo does not gather a team of collaborators, he recruits a "strike force" (245). Of the actions of this team, Lapierre comments: "This mobilization would have served no useful purpose. . . had Gallo not supplied his troops with the ammunition they needed to fight." (246) It is significant, I believe, that when Lapierre uses such imagery as "The combatants against AIDS [who] would receive their new supplies just in time" (325), gay men with AIDS are excluded from the "combat." The battle is being waged on their behalf, by scientists, doctors, and researchers. Those who have most at stake are curiously barred from participation.

Military imagery is not only common in the crisis of representation literature. Monette writes *Borrowed Time* as an elegy to a fallen soldier and, as such, uses

martial imagery generously. He tells the reader from the outset that the entry of AIDS into his life means "suddenly you are at high noon in full battle gear. They have neglected to tell you that you will be issued no weapons of any sort" (2). Monette quickly realizes the extent to which the "battle" was underway by the time of Roger's diagnosis: "The edge of the minefield is fairly common ground these days among gay men" (14). All "strategies" prove useless in this battle: "Warriors in pitched battle do not make their last will; they become it" (75). As more of his friends are diagnosed with the HIV diseases, Monette seeks ways of steeling up against the enemy: "Checking in with Bruce and Cesar was my way of assuring myself there would be no break in the line, for they were my platoon" (195). It is the mutability of the virus which renders the meagre "ammunition" at Monette's disposal useless: "The enemy has grown so subtle, its camouflage so chameleon, we had to be on constant watch" (252). By the end of his text, Monette begins to deconstruct his martial imagery: "We were all being assaulted now with the verbiage of self-help guerillas who said gay men had brought AIDS on themselves" (279). Military imagery is so prevalent that even the works which best represent the AIDS counterliterature are seldom free of this imagery.

If history is seen simply as a series of monuments of achievement, like the battles of warfare, then personal testimony is devalued. There is precious little room for personal testimony in Shilts' or Callwood's narratives, which are constructed as nonfiction (point of view and genre are both relevant here) even while pretending to be personally involved with the characters' struggles. Where

Lapierre includes personal testimony, it is often to express the characters' guilt, shame, or regret. The greatest danger posed by the harmful AIDS representations is that AIDS will become the entire story, the single defining moment, not just of an infected individual, but for all of gay history. Or, worse, that AIDS is offered as the historical "response" to, and natural consequence of, the supposedly heady days of the 1970s "sexual revolution." Shilts, wistfully, and Lapierre, smugly, use their narratives to refer back to the sexual liberty of the 1970s. The final consequence of these representations is the dismissal of any sort of important historical contribution to society on the part of gay men. Gay men become little more than the militant vanguard of the fabled (and failed) sexual revolution.

As James Jones says in "Refusing the Name," gay identity is threatened "by a society that would like to use AIDS as an excuse to erase the existence of gays" (237). Writers of the harmful AIDS representations play right into the hands of those who would erase both gay men and AIDS from history. Literary texts, which in themselves can little alter monumental history, often parallel the subject's personal history (his testimony) with the history of his society. The personal testimony conveyed by literary texts offers an alternative means of shaping the history of AIDS.

Reclaiming History

AIDS counterliterature rewrites history to include gay men and lesbians. It

serves to meaningfully add AIDS to the greater picture of our culture's history. The counterliterature disregards the narrow focus of monumental history and focuses instead on an imaginative understanding of history. This process leans on testimony to set the record straight for posterity and to hold accountable for their negligence those who allowed the AIDS representational crisis to further damage the lives of a marginalized population. Watney writes of the importance of testimony:

> It is sad that many of those who have suffered most are no longer around to tell their stories. We owe it to them, and to ourselves, to remember that many others will live through these bad times to see justice done. To set the record straight we will need evidence of the culpable, deliberate, criminal folly and malice that continues to cause so much unnecessary suffering and pain on top of the tragedy of AIDS. (154)

In the AIDS counterliterature, gay men tell the story of AIDS from inside, offering their own sets of imagery, their own settings, and with genres they choose. The counterliterature provides the means to further empower the author's point of view for his readers. It shows the importance of gay men throughout all of history and that gay history will continue long after the AIDS crisis has passed. AIDS counterliterature foregrounds the power of testimony as a tool of activism and education.

The rhetorical strategies highlighted in the reclamation of history include point

of view, setting, genre, and patterns of imagery. These strategies foreground testimony to refocus on the personal rather than the purely collective perspective. As monumental history gives way to a more imaginative model of history, the margins of society begin to be included in the larger picture. In "imaginative" history, images of strength take precedence over monuments of achievement, so telling stories takes on a much greater significance. When Coe's Oliver falsifies Jasper's cause of death, the narrator Timothy ponders:

> For the good of science, for the sake of research, and for those who have yet to live--for the future and even the sake of humankind--every AIDS death should be recorded as an AIDS death. (204)

In this case, Oliver's lie, his silencing of Jasper's testimony, has ramifications far beyond the reach of one individual life. Monette uses the life and death of one man to explore the panorama of gay history in North America. He explains: "I try to remember that we fight as a ragged people to outlast the calamity so that others can sleep as safe as my friend and I" (125). Monette moves from the immediate narrative action to the innermost recesses of his characters' minds without compromising his orientation towards one gay man's story, his personal testimony, as a worthy addition to his society's history.

Setting is another important rhetorical element of history, such as the reclamation of the beach "space" and the focus directed towards a more mythical space or symbolic setting (ancient Greece, utopia). In my chapter on representations of identity, I mentioned the beach as a setting for sensuous

imagery. The beach can represent the frontier, the landfall, the final retreat, the collision of cultures. For Andrew Holleran's narrator in "Ties," the beach represents a bridge to his past: "I wanted to be in the ocean toward the end of August when the sea was warm off Fire Island" (212). The image of the beach has long carried symbolic weight for gay men. In "Dante on Fire Island," James Miller explains: "Since at least the 1940s, gay colonists have turned the national seashore of Fire Island into a margin of their own mythology" (268). For Baker, McGehee, Coe, and Monette the beach is simultaneously prospect and refuge, battleground and nurturing womb.

The film *Longtime Companion* compares the cure for AIDS to the end of World War II, not so much in the triumph over tyranny as in the wild jubilation of the huge celebrations which ensued. The film ends with the three surviving central characters being unexpectedly greeted by a procession of friends and loved ones they had lost to AIDS. Thus the final triumph over AIDS in *Longtime Companion* is the triumphal return to "the beaches of the dispossessed" (25) from which Shilts had banished gay men. The AIDS counterliterature is filled with images of beaches, and pivotal events transpire at or en route to the beach. In *Tim and Pete*, Tim reflects on Gidget and the wholesome "Beach Blanket" movies of his youth:

> I sang a few bars of the Sandra Dee movie theme song, but instead of amusing me, it sickened me. The past was all used up. I imagined Gidget in a hospital bed, covered with KS lesions. "Moondoggie, why? I didn't do anything wrong. . ." (10)

Baker's Tim re-enters the world of the living/loving after his miserable date with Victor, which had begun at Laguna Beach, "jammed because of the holiday and the heat" (17). Following the violent encounter with the homophobic congressman, *Tim and Pete* head towards Long Beach, driving past "the surfers in the ocean off Huntington Beach" (52). The kamikaze PWAs plan to assassinate a gathering of right-wing Republicans, "the people who invented Ronald Reagan" (235), in La Jolla, "a pleasant Sunday drive down the coast" (241). For Shilts, Baker, and the film *Longtime Companion*, the beach represents a "beach-head" in the "fight" against AIDS.

Coe's beach is more metaphorical than Baker's or Monette's. Timothy details a vibrant adolescent dream in which a handsome man approaches him in a room with many windows: "The room became a beach, a wide stretch, and the tide was turning on it, going out" (109). Timothy dreams of the future denied him and Jasper because of AIDS: "We stroll into the surf like old men, which we would become, given time" (242). The memory alone of the one time he and Jasper made love on the beach, Timothy says, "would be worth living for" (268). For McGehee, the beach lacks the metaphorical significance Coe assigns to it. While down in Arkansas, Zero escapes the frenetic demands of his family and heads to the gay beach, "really just a sandbar tucked in behind some weeds" (*Boys* 107). This beach has both pleasures and hazards. Zero sees Lance on the beach: "He hops up and disappears into the bushes. I follow, praying to avoid the poison ivy" (107). When Zero complains that Clay's new condo is in the suburbs, Clay

corrects him: "It's technically part of the Beaches" (140). Zero ultimately refuses to move in to Clay's condo, sensing that there's more to life than "the Beaches." He rejects "the Beaches" as the embodiment of the bourgeois heterosexual ideal, not the sex and frivolity he had enjoyed at the beach. At the conclusion of *Sweetheart*, Zero and his true love Jeff find themselves in Los Angeles: "We go to the beach. Walk, relax" (198). Thus the beach is, for Coe and McGehee, a place simultaneously ordinary and deeply meaningful.

In *Borrowed Time*, Paul and Roger, "putting the blizzard of daily life on hold" (6), make an annual drive to Big Sur. As Roger's condition worsens, the beach takes on a more sinister cast, as Monette records: "Roger and I were on the beach at Normandy" (43). Like Shilts, Monette often combines martial imagery with the beach scene. He recalls the "island" of the hospital:

> Later, of course, when the Swiss family treehouse came crashing down, the island seemed a mirage, but now the stronger memory is how happy we were to beach there. (129)

While visiting Monette's parent in Maine, the two men walk along the beach at the mouth of the York River:

> Roger and I went out to the beach for a breath of sunset. We walked down into a sort of cove with a rim of summer millionaires, white shingle with green and blue shutters, the opposite of Aegean. Roger stood, feet apart, in the sand, sniffing the sea breeze while I capered down to trail a hand in the water. (162)

In *Borrowed Time*, as in many of the AIDS stories, the more meaningful "beach" is inside, in memory and hope. Monette's Bruce asks that his ashes be scattered on Fire Island, "The *most* beautiful place. . . with the *most* beautiful boys (222). This last request means not shamefully turning away from his sun-drenched, sex-filled past, his life before AIDS, but reaffirming it. With Roger in the midst of his final hospitalization, Paul takes one more trip to Big Sur, writing his and Roger's initials in the powdery sand: "I left our mark" (316).

The didactic value of each AIDS text often determines if it gets added to its culture's history. One common understanding of history, particularly monumental history, is that it must instruct as well as simply, albeit selectively, record. The function of a particular text is relevant to genre. Carr says the function of history is "to promote a profounder understanding of both past and present through the interrelation between them" (86). In "Once I Had it All," John Clum says:

> While gay fiction in the last few years tried to incorporate the dark design of AIDS into the larger tapestry of gay life, other cultural productions have recorded the second wave of response to AIDS, that of fighting for a future for PWAs. (219)

These "cultural productions," which I consider the AIDS counterliterature to be among, ensure that the voices of gay men with AIDS will not be silenced by historiography. Imaginative history leaves sufficient room for the testimony of individuals, whether at the core or the margins of a society.

Testimony highlights another important purpose of history: to shape the

direction history will help a society move in. For many of the AIDS writers, the greater "theme" they expose is the failure of society to tend to its most vulnerable members. Genre is especially critical here, since historical nonfiction is a recognized genre unto itself. The AIDS counterliterature uses a multiplicity of genres to imaginatively rewrite history: *Borrowed Time* is a biography, a novel of sensibility, and a story of degeneration; *Tim and Pete* a quest-novel, broadly speaking, and picaresque road-trip; McGehee's novels are fictionalized memoirs with occasional forays into "satiric fantasia" (to use Booth's term). In addition to expanding the range of genres by which AIDS stories can be told, we might consider the possibility of new kinds of literature which may be better equipped to convey the magnitude of the AIDS crisis. In "Beyond Good Doctor, Bad Doctor," Robert Franke speculates:

> the AIDS literature until now suggests a new genre may be rising whose role is to acknowledge the failure of the scientific/technological view to support the complex physical and emotional demands imposed by the disease, and to force society to rethink the relationship between science/technology and the broader human experience. (100)

In addition to considering new genres better able to convey the scope of AIDS, the counterliterature can rewrite existing genres. In *Sweetheart*, McGehee focuses on Randy's epitaph to counter the humorless, desexualized denials which lie atop Monette's "shallow bachelors' graves." Zero tells Randy's belligerent father:

> "Randy made it very clear he wanted the fact that he had AIDS mentioned. He felt it was degrading to leave it out. To him and everyone else with the disease." (30)

Randy wants his epitaph to remind others both of his wry, mischievous sense of humor and of the disease which claimed his life. The epitaph reads, simply: "If there were options in the air, my legs were right up there with 'em" (202). The epitaph is meant to be "humorous and sexual to counter the usual impression people have of this disease" (28). It is a humorous, sexual, and ultimately life-affirming message which reconsiders the shame and secrecy of having AIDS, or even of being gay, offered by mainstream representations. The characters in McGehee's novels still manage to live and love meaningfully despite their HIV status.

Finally, particular tropes are prevalent throughout the AIDS counterliterature, such as those of archeology and ancient Greece, the impending apocalyptic dystopia, the Jewish Holocaust, and global conflagration. Many of the AIDS texts use archeological imagery to uncover the hidden or "intrinsic" gay identity, the one supposedly free of homophobic social conditioning. While my own sense is that gay identity is more socially-constructed than it is innate, many AIDS narratives not only presume an innate gay identity but locate it, symbolically, in ancient Greece. For many white, middle-class North American or European gay men, the trip to Greece is a pilgrimage to the site of the beginnings of gay history. Monette finds in Greece the mythic origins of his own identity, both as a writer

and a gay man, in the "broken slabs and columns lying in the fields, covered with Greek characters erasing in the weather" (146). He says it is "Impossible to measure the symbolic weight of the place for a gay man" (20). Cesar speculates that "ancient places 'confirm' a person, uniting a man to the past and thus the future" (22).

Coe's Timothy grounds his gay identity in "a line in a Greek poem" (52), which he attributes to either Pindar or Constantine Cavafy: "women for progeny, boys for pleasure, but a man for ecstasy" (53). Timothy and Jasper's first date is at "the Greek place," a restaurant in New York called "the Acropolis" (71). Timothy also mentions Dominic's long and inspiring sojourn in Mykonos (160). Vernon's Hal talks about an HIV-positive couple who plan on "giving up their Manhattan apartments and moving to Greece" (247). The common denominator to Vernon's, Coe's, and Monette's characters is that they are all relatively affluent. Feinberg's first sentence in the chapter "Regrets" is "I've never been to Greece" (268). Never visiting Greece means, for some, never getting in touch with the historic tradition of "homosexuality," and perhaps the very roots of modern gay life.

Greece has become a spiritual pilgrimage for any gay man with the means. It seems a minor point that erotic love between men had very different codings for the ancient Greeks than for late 20th century North American gay men. McGehee's texts are filled with references to Greece. David and Zero visited Greece during a happier past, and Snookums dreams of visiting: "Home of Alexander the Great, Plato, Socrates, Homer, not to mention those marvelous

islands" (*Boys* 136). Uncle Markus and Jesus Las Vegas plan a trip to Greece (*Boys* 155) and, upon returning, Jesus proclaims Greece "Heaven on earth" (*Sweet* 117). Often these references signal what once was and can never be again, a life before AIDS, or even consolation for the suffering imposed by AIDS. Monette continually refers to his last trip to Greece with Roger. He brings photographs into the hospital and he and Roger "talked our way through the Aegean again" (234). While reliving their many travel adventures, they recall Phaestos in Crete, where they had "the whole ruined palace all to ourselves" (290). In *Tim and Pete*, the deranged Glenn, in a moment of wistful lucidity, says "the city of Eros is now a necropolis, and all I have left are my memories" (218). Monette offers a possible explanation for the persistence of Greek ruin imagery: "A gay man seeks his history in mythic fragments, random as blocks of stones in the ruins covered in Greek characters, gradually being erased in the summer rain." (22)
Greek expeditions in the AIDS literature often becomes much deeper than a mere yearning for less complicated times; lives are transformed, reinvested with meaning and purpose, by visits to lost civilizations.

In *Beyond Love*, Josef Stein reveals his "attraction to lost civilizations" (255) but finally gives up archeology as AIDS increasingly restricts his mobility. In *Such Times*, Oliver counts the ruins of "Uxmal, Chichen Itza" (288) among the places he and Jasper once toured. When he and Roger could no longer travel, Monette recalls, "By way of armchair travel we especially liked to talk about digs" (235). We are at a point in history where sexuality is once again equated with

hygiene, and gay sex with illness. Schecter says: "AIDS raises the specter that sex is death, and beyond that association, doubts about what sex has meant and the way that meaning has been socially structured." (92)

The process of overturning this harmful equation involves bridging past and present, showing the continuity of gay men throughout history, and foregrounding the pleasure, self-affirmation, and universality of the sexual act.

The counterliterature addresses the most pervasive imagery of the HIV illnesses, such as military metaphors. Martial imagery is so common in AIDS narratives, including mass media representations, that the absence of such imagery, such as in the novels by McGehee or Mars-Jones' "Slim," becomes noteworthy.[9] In *Borrowed Time*, Monette insisted on a militarization of his language, calling AIDS "the war we bore within us" (195). It may be that Monette is attempting to reclaim this privileged mode of recording history. Feinberg, like Monette, uses military metaphors freely, calling the AIDS activists "the bravest army ever":

> Some of us are sick; some of us are covered with lesions; some of us can barely walk. . . some of us are healthy and lending our fullest support to this cause because we are fighting for our lives! (28)

At the other extreme, Sontag insists that illness needs to be freed from all its metaphorical associations, especially those which offer martial imagery to the exclusion of other representations. McGehee's use of martial imagery, though

sparse, seems less strident than that of many of his fellow writers. In *Sweetheart*, Zero watches a fellow gay man with AIDS at his doctor's office, wearing a "bomber jacket," as this man is humiliated by the indifferent receptionist. He and Jeff attempt to place the incident in the context of their own lives. Zero admits that, although "the battle rages," he has learned something verging on transcendent, something Jeff calls "The camaraderie of the front lines" (161).

Instead of wholly dismissing martial imagery, McGehee attempts to use it to emphasize the cohesiveness of gay men as they face the AIDS crisis together. Schecter offers an explanation, in the form of a question, for the persistence of military metaphors:

> Do people have recourse to war analogies because they feel love is too weak, too allied to desire that they intuitively know governments are trying to control, too sissy a word for an epoch of such virile rationality, and far too complicated? (51)

Schecter's question is intended to stress the importance of alternative metaphors. In "The Language of War in AIDS Discourse," Michael Sherry says that martial imagery does not so much inform divergent parties' perspective on AIDS as it serves as "the sieve through which they pushed strikingly different agendas" (44). McGehee's and Monette's use of military metaphors include love and desire along with the more familiar associations of battle and conquest.

The Jewish Holocaust is frequently invoked in AIDS representations. One of the more sustained uses of the metaphor is found in Larry Kramer's *Reports From*

the Holocaust:

> AIDS is our holocaust. Tens of thousands of our precious men are dying. Soon it will be hundreds of thousands. AIDS is our holocaust and Reagan is our Hitler. New York City is our Auschwitz. (173)

For Kramer, the commonality between AIDS and the Jewish Holocaust is in "the systematic, planned annihilation of some by others with the avowed purpose of eradicating an undesirable portion of the population" (263). Michael Sherry says:

> The Holocaust metaphor naturally invited prolific use of "fascist" and "Nazi" as well. Throughout the 1980s, those terms were applied in gay rhetoric to supposedly malign politicians, government officials, corporate leaders, or doctors, but also to supposed enemies within gay ranks themselves. (42)

While Monette himself, like Kramer, Shilts, and Lapierre, invokes the Holocaust, he also claims: "Anything offered in comparison is a mockery to us. If hunger compares, or Hamburger Hill or the carnal dying of Calcutta, that is for us to say" (83). Monette's strategy frequently involves a deliberate questioning of what constitutes a society's history.

Monette offers an important purpose for AIDS literature: to leave a record of his time as a bridge between his generation and future generations of gay men. He offers the courage and cohesion of the gay community facing AIDS as an inspiration to future generations. Schecter admits the emotional benefits for the

author of telling his story but also, like Monette, makes a time-capsule of his testimony, one important point on the continuum of gay history. Timothy Murphy says that "failure to testify would amount to betrayal, would be continuous in meaning with the absurdity of the epidemic" (319). If the AIDS epidemic lacks meaning, our responses, even if only as readers, must not.

The testimony in the AIDS counterliterature offers something more profound than a mere monument to the millions whose lives were shortened by AIDS. In Camus' *The Plague*, Dr. Rieux treats his final patient as the two men speculate on the possibility of a plague monument. The old man asks the doctor:

> "Is it a fact they're going to put up a memorial to the people who died of plague?"
>
> "So the papers say. A monument, or just a tablet."
>
> "I could have sworn it! And there'll be speeches!"
>
> Again he chuckled throatily. "I can almost hear them saying, 'Our dear departed. . .' And then they'll go off and have a good tuck-in." (251)

No monument could meaningfully address and honor a tragedy of the magnitude of the AIDS crisis. In the short story "Sex and Love," McGehee's narrator Kevin attempts

> to imagine a vigil worthy of the people I've known. I see something at Radio City Music Hall. Thousands of AIDS patients. In a chorus line. Sick and skinny and can-canning across that great stage. (70)

In the testimony of his characters, McGehee offers an alternative "great stage" upon which to enact his personal history.

The AIDS counterliterature reclaims the affected subject/character as worthy of the reader's empathy and identification. It reestablishes his importance in the imaginative history of his culture. Scandalized by his son's salacious epitaph in *Sweetheart*, Randy's father grumbles, "'He always has to have the last word, doesn't he?'" (29). Murphy reminds us that "Testimony, not death, is the last word" (316). Testimony means a reconsideration of how we record the history of our culture, whose stories we weave into the greater tapestry of voices. In other words, the AIDS counterliterature offers a version of history not as a series of monumental achievements, but as layers of overlapping movements and meanings, some very localized, grass-roots, and often relying heavily on personal testimony.

Conclusion

The most significant literary responses to AIDS, the ones which finally overturn the harmful rhetorical strategies which diminish the quality of life for individuals with AIDS, have yet to be written. What we have in the works of McGehee, Baker, Coe, and Monette offers promise, nonetheless, that literature can make a significant contribution in overcoming the crisis of representation. The AIDS counterliterature reestablishes the identity of the person with AIDS, offers new or multiple sources of self-empowerment for that person, and offers personal testimony as an important component in an alternative kind of history.

The medical and scientific treatment of AIDS needs to continue to focus on more effective, less toxic drug therapies, on developing an HIV vaccine, and working towards an eventual cure for all of the syndrome's infections and illnesses. The rhetorics of AIDS supply their own "treatment" of the AIDS crisis, but some of these rhetorics likewise require "treatment." In "AIDS, Stigma, and Narratives of Containment," Julia Epstein says that "monitoring our narratives is only one place to start" (304) in the AIDS crisis of representation. She explains:

> The academic and cultural critique of HIV infection and AIDS has its uses, but certainly by itself it does not alter the fact that on the street, people are experiencing the pain, fear, and fatigue of opportunistic infections, of pneumocystis carinii pneumonia and

> thrush and pelvic inflammatory disease and Kaposi's sarcoma and cytomegalovirus. (303)

While I agree with Epstein that countering harmful AIDS rhetorics in itself is not enough, neither is it enough to focus exclusively on the medical realities of AIDS: the two must go hand in hand. As Lee Edelman argues in "The Plague of Discourse," "discourse, alas, is the only defense with which we can counteract discourse, and there is no available discourse on AIDS that is not itself diseased" (316).

AIDS rhetorics serve as a means of transmitting metaphor and sets of imagery. Misrepresentations about AIDS question the intrinsic worth of an individual life, keep that individual disempowered, and ultimately erase him from the history of his times. The crisis of representation surrounding AIDS has profound repercussions not just for the gay men living with AIDS, or those who have died from AIDS, but for a society which has lost the capacity to recognize, embrace, and heal all of its members. *In Muses From Chaos and Ash*, Andréa Vaucher discusses the reach of AIDS art:

> late-twentieth-century AIDS art will undoubtedly provide significant keys to understanding the culture and society of our time in a framework much broader than an artistic one. (7)

Where the AIDS counterliterature is successful, it presents its own new sets of meanings to counter all the prevailing misrepresentations. These meanings encompass understanding, compassion, hope, and healing. Awaiting his cousin

Trebreh's impending death, Zero cuddles Jeff:

> We look at each other, a look full of longing and love. A look that says: This will all be over soon and life will return to some semblance of normalcy if we can just hold on. (*Sweet* 189)

The AIDS counterliterature, however, does much more than just bide time while the crisis persists. It responds in a meaningful and healing way to the changes AIDS forces upon our world. Schecter affirms the primacy of touch and the sexual act:

> the touching of the other is also the touching of oneself, the growing to consciousness of what life gives and takes away, that passes verily and inevitably through the envelope of the flesh that is more than flesh. (83)

In his article "Once I Had it All," John Clum states: "Gay AIDS literature must deal with the past sexuality=present disease issue in a way that either breaks the chain or affirms the past in a healing way" (207). A large part of this drive must be educational. It needs to be stressed, particularly in our own anti-erotic times, that sex in its entire spectrum of expression is positive and life-affirming. Schecter says: "If a young man wants to be fucked, tell him about trust, counsel caution, perhaps even two condoms, but talk also about the pleasure of love's body." (133)

James Jones, in "The Plague and Its Texts," agrees with Schecter of the importance for gay men to "reassert their sexuality, thus refusing to become the non-threatening creatures that the majority would like them to become" (79).

Mainstream representations about AIDS ground HIV infection in the sexual act, but the counterliterature attempts to free sexual acts, and sexuality itself, of this dangerous association. Polite fictions surrounding gay men with AIDS, quietly living with the condition and quietly dying from it, have no place in the AIDS counterliterature.

A priority of the AIDS counterliterature is to educate its readers about the intricacies of the illness and the debilitating power of its misrepresentations. Educating young people about AIDS, especially modes of transmitting HIV does, as Sontag says, "imply an acknowledgement of, therefore tolerance of, the ineradicable variousness of expression of sexual feeling" (163). Roger Myrick argues: "Effective safe sex education. . . will work to encourage and empower the voices of multiple marginal communities who are being affected by the disease." (58)

This new, braver kind of education signalled by the AIDS counterliterature cannot be squeamish about "endorsing" homosexual behavior, nor can it avoid the language which will reach its intended audience. The counterliterature calls upon education, in conjunction with activism, to partake in healing the AIDS misrepresentations. It carries with it an unflinching insistence that young people are taught how to feel and express their love, and how to enjoy sexual acts, free of guilt, shame, or the fear of AIDS.

Notes

1. In John Greyson's AIDS musical *Zero Patience*, Dugas is allowed to respond to some of Shilts' charges. It is likely significant that McGehee chose to call his narrator "Zero."

2. In *Tim and Pete*, Tim says to Pete, "'*The dick of death*. That was your favorite expression, wasn't it?'" Pete replies: "'Yeah, right. It sounds like a name. Dick of Death. Like Jesus of Nazareth.'" (193)

3. In *AIDS and Its Metaphors*, Sontag argues that there is a link "between imagining disease and imagining foreignness" (136): "The AIDS epidemic serves as an ideal projection for First World paranoia. Not only is the so-called AIDS virus the quintessential invader from the Third World. It can stand for any mythological menace. In this country, AIDS has so far evoked less pointedly racist reactions than in Europe, including the Soviet Union, where the African origin of the disease is stressed" (150).

4. If young gay men are beginning to indulge in "high-risk" sexual behavior once again, it may have less to do with the "hype" about new AIDS drug therapies than with the failure of the mass media and the educational system to make young people sufficiently aware of the ongoing crisis.

5. Patrick Buchanan, quoted in Shilts' *And The Band Played On* and reprinted in newspapers across the USA in the summer of 1983: "The sexual revolution has become to devour its children. And among the revolutionary vanguard, the Gay Rights activists, the mortality rate is highest and climbing ... The poor homosexuals--they have declared war upon nature, and now nature is exacting an awful retribution" (311).

6. This fascinating construction is a deliberate reversal of the medicalization of sex common to harmful AIDS representations. Instead, Mars-Jones attempts the sexualization of illness.

7. The "official" causes of death for Bennett, Ellis, Cohn, and Liberace were, respectively, heart failure, sleeping sickness, liver failure, and heart failure from the ill-effects of a watermelon diet.

8. Monette comments: "It was often remarked acidly in West Hollywood that if AIDS had struck boy scouts first rather than gay men, or St. Louis rather than

Kinshasa, it would have been covered like nuclear war" (110).

9. Mars-Jones' narrator refers to the AIDS volunteer he calls "Buddy": "I'll bet his white corpuscles don't need a pep talk. Crack troops, no doubt about it" (8).

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